Church Update Worksheet - 2016

Church Name:	City:
Phone Number:	Website:
FAX Number:	Email:

Please list the name and start date of each credentialed church staff member by the description that best fits their position:

POSITION:	NAME:	START DATE:
Lead (Senior) Pastor		
Administrative Pastor		
Associate Pastor		
Children's Pastor		
Children/Youth Pastor		
College Pastor		
Connection Pastor		
Co-Pastor		
Executive Pastor		
Family Life Pastor		
Media/Tech Pastor		
Missions Pastor		
Outreach Pastor		
Pastoral Care Pastor		
Site Pastor		
Teaching Pastor		
Worship/Arts Pastor		
Youth Pastor		

Please list the name and ministry (if known) of each credentialed minister that regulary attends your church.

NAME	MINISTRY	NAME	MINISTRY

Please email completed form by Tuesday, JANUARY 10, 2017 to: suel@northwestministry.com Northwest Ministry Network 35131 SE Douglas St. Suite 200 Snoqualmie, WA 98065 | 425-888-4800