Connect Group Attendance Sheet

Leader's Name: _____ Meeting Date: _____
Apprentice: _____
Communication Coord:_____
CARE/Hospitality Coord:_____
Outreach Coord: _____

	Complete Name	A.C.	Street Address	Phone	S.C.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

Status Codes (S.C.)
B - Baptism/H.S.
L - Leader
S - Salvation
H - Healing
V - Visitor

Age Codes (A.C.)
A - Adult
C - Child
Y - Youth

Prayer Needs, Surgeries or other critical things within the group that the Pastor needs to know about: _____

_____

_____

Testimonies/Comments: _____

_____

Please turn in this report to the church office by the Wednesday following the meeting. It can also be faxed (479.631.0070) or completed online as well.