**Community of Faith Supervisor**

**REPORT FORM for** \_\_\_\_\_\_\_\_\_ *(year)*

Name of Community of Faith: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Community of Faith Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Number of meetings: | |
| Number of baptisms:  Number of communions celebrated: | By whom:  By whom: |
| Has an annual meeting been held? Yes / No | Date: |
| Type of governing body  *(e.g. Council, Session and Stewards, Official Board)* | |
| Name of Lay Rep to the Regional Council: | Email address: |

State of the Community of Faith:

Any recommendations of ways that the regional council can help?

*Report submitted by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

PLEASE SEND COMPLETED REPORTS TO REV. DAN HAYWARD: [*dhayward@united-church.ca*](mailto:dhayward@united-church.ca)