**Community of Faith Supervisor**

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

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

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

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| 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*