

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.					
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17.					
18.					
19.					
20.					

Status Codes (S.C.)

B - Baptism/H.S.

S - Salvation

V - Visitor

L - Leader

H - Healing

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.