

The North Enoree Sunday Church School Congress Greenville-Spartanburg Counties, South Carolina



SUNDAY CHURCH SCHOOL ANNUAL UPDATE FORM

Date: _____

Name of Church: _____

Name of Pastor: _____

Name/Address/Telephone Number of Superintendent: _____

Number of Active Church Members: _____

Number of Students Enrolled in Sunday Church School: _____

Number of Teachers: _____ Number of Assistant Teachers: _____

How Many Classes: _____

Who is the Publisher of your Sunday Church School Literature? _____

What National Convention is your Church affiliated with? _____

What Christian Education Courses would like to be taught at your Church? _____

Name of the *Teacher of the Year* for Your Sunday Church School: _____

What type of assistance would you like to see from the Sunday Church School Congress?

PLEASE SUBMIT THIS FORM WITH YOUR REGISTRATION TO THE SECRETARY