

Contact Name



CURRENT PARTNERSHIP MISSION PROJECT

This form is for churches who have current existing partnerships.

Contact Address				
City/State/Zip				
Contac	Contact Email			Contact Phone
Church Name				
Church Address				
Brief description of your project:				
Do you have an IMB or Baptist Connection on location?				
	No	Yes; Who?		
NATURE OF THE PROJECT: (Check appropriate box)				
	VBS / Backyard Bible Club		Leadership Training	
	Construction		Pastoral Ministries	
	Medical		Discipleship	
	Evangelism / Revival		Church Planting (Multiplication)	
	Safe Water		Small Group Ministries	
	Sport Ministries		Family Ministries	

