

BIG HATCHIE BAPTIST-WMU

2011-2012

CHURCH: _____ .COMPLETED BY: _____

PHONE: _____ E-MAIL: _____

*****PLEASE COMPLETE AND RETURN TO DIANE SORRELL BY AUGUST 15, 2011*****

1. **CHURCH DIRECTOR:** _____ Phone (H) _____

Address: _____ City/Zip _____

Phone: (Cell) _____ E-Mail: _____

2. **CHURCH ASSIST:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail: _____

3. **CIRCLE DIRECTOR:** _____ Phone
H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail: _____

4. **CIRCLE ASSIST.:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail: _____

5. **WOMAN on MISSIONS:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone (Cell) _____ E-Mail: _____

6. **ADULTS on MISSIONS:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail: _____

7. **COLIGIATE MISSIONS:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail _____

8. **ACTEENS/YOUTH on MISSIONS:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail: _____

9. **GA'S/CIA:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail _____

10. **MISSION FRIENDS:** _____ Phone (H): _____

Address: _____ City/Zip: _____

Phone: (Cell) _____ E-Mail: _____

*POSITION: _____ NAME: _____

Address: _____ City/Zip: _____

Phone: (h) _____ (c) _____ E-Mail _____

*POSITION: _____ NAME: _____

Address: _____ City/Zip: _____

Phone: (H) _____ (c) _____ E-Mail: _____

*POSITION: _____ NAME: _____

Address: _____ City/Zip: _____

Phone: (h) _____ (c) _____ E-Mail _____

*POSITION: _____ NAME: _____

Address: _____ City/Zip: _____

Phone: (H) _____ (c) _____ E-Mail:

| | | |
|-------------------|--------------------------------|-----------------------|
| ***TOTALS: | ADULT: LEADERS _____ | MEMBERS: _____ |
| | CHILDREN LEADERS: _____ | MEMBERS: _____ |

SEND TO: Diane Sorrell
52 Hastings Way
Covington, Tn. 38019-9600

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Phone (C): 901-482-2236
E-Mail: diane-sorrell@att.net