VBS 2021 CHURCH REPORT FORM

Congregation Name:					
Address:	City:	State:	Zip:	_	
Contact Name:	ontact Name: Pho		one:		
Thank you for taking time to rep	oort your VBS. You may submi	t your report using one of th	ne following optior	ns:	
1. ONLINE at http://vbs.lifew	ay.com/churchreport.				
2. MAIL to your state convention office. Do NOT mail to LifeWay.					
If you conducted multiple even church but hosted by another e	stablished SBC church or mis	sion should be reported by	the host congrega	tion and not by you.	
NOTE: REQUESTS FOR STANDARD VBS RECOGNITION SHOULD BE MAILED TO YOUR STATE CONVENTION OFFICE AND NOT TO LIFEWAY CHRISTIAN RESOURCES.					
Check all that apply:	☐ Traditional VBS	☐ Backyard Kids Club	o # of Lo	cations	
1. Total Enrollment (sum of a–	f)	8. Time of Day	C	☐ Morning	
a. Volunteers				☐ Afternoon	
b. Birth–Kindergarten				☐ Evening	
c. Grades 1–6		9. Daily Schedul	le [☐ 3 Hours	
d. Grades 7–12				☐ Expanded	
			C	☐ Abbreviated	
e. Adults Attending a Clas f. Special Education/Need		10. Missions Off (round to ne			
2. Average Attendance		☐ Cooperative	Program [☐ Other	
3. Decisions to Accept Christ		11. Resources U	sed (check all that	apply)	
4. Decisions for Vocational Ministry		☐ LifeWav's	☐ LifeWay's Concrete & Cranes [™]		
5. # Unchurched Individuals Discovered			LifeWay's Destination Dig™		
6. Date Event Began					
7. Event Length (# of days)		☐ Other Life	LifeWay's Go & Tell Kids®Other LifeWay CurriculumOther Publisher		
		☐ Created b			

12. If LifeWay VBS resources did not meet your needs,

^{**}Please submit report within two weeks of the conclusion of VBS.
Form must be returned by November 15, 2021.