

ALABAMA VBS CHURCH REPORT

Church Name:				
Church Address:				
	(physical) Street Address	City	State Zip	
VBS Director:				
Phone:		Email:		
Association:				
Before you turn the page on VBS this year, would you please take 60 seconds to report your VBS?				
• Please complete the required fields.				
• Complete report regardless of the curriculum used.				
	m multiple VBS events into one report (V	BS. BKC, Mission Trips). R	eport mission VBS events if	
host church will not	be reporting. t if your church DOES Not have VBS. Ent	or "NO VPS" in place of da	to in itom 1 holow	
• Complete vBS report	t il your church DOES Not have VBS. Enti	er NO VBS in place of da	te mitem i below.	
Important	: Submit the completed VBS repo	rt at the conclusion o	f vour VBS or by Sept 1 st	
Email the completed report to: <u>pburns@alsbom.org</u>				
Or mail to: Alabama Baptist State Board of Missions, Sunday School & Discipleship,				
P O Box 681970, Prattville, AL 36068-1970				
This information helps us to better serve your church and to celebrate what God has done through VBS at home and around the world!				
1. Start Date of VBS (m/dd/yr)		5. VBS Enrollment		
2. What format did you choose? (Mark all that apply)		Wor	ker's Children (Birth – 3 yrs)	
Traditional (5 Days)				
□ Weekend		Pres	school (4 yrs – Kindergarten)	
🗌 One Day			Children (1 st – 6 th)	
□ BKC/Missi	ion		Students	
			Stutents	
🗌 Other (bri	ef description)		Special Friends	
3. Time of day 🗆] Morning 🛛 Afternoon 🛛 Evening		Adults	
4. Resources use	d: (mark all that apply)	All Lea	ders, Teachers & Volunteers	
🗆 Lifeway			TOTAL VBS Enrollment	
🗆 ВКС			6. Decisions to Accept Christ	
🗌 Group		7. Decis	ions for Vocational Ministry	<u> </u>
Answers Ir	n Genesis	8. Missions Offering	(rounded to nearest \$)	
□ Created by	/ church	 Cooperative Program Other (If other, provide 	brief description)	
🛛 Other (brie	ef description below)	9. VBS Missions Project		