






CONTACT INFORMATION

 Leader Name: _____

 Address: _____

 Email: _____

 Phone Number: _____

MISSIONS MONEY GIVEN:

1. Translations _____
2. Kids On A Mission (YWEA) _____
3. Covenant Sister _____

YOUR ACTIVITIES

List social activities and service projects your ministry participated in this month on a separate sheet of paper and include it with this report.

If mailing your report, please send to your State Office, postmarked by the 5th of the month.

Girls MINISTRY

REACHING TODAY'S GIRLS WITH GOD'S PROMISES!

Local Report Form

Month _____ Year _____

NAME OF CHURCH - _____

CITY - _____ STATE - _____

ZIP - _____ FILE NO. _____

THIS REPORT IS FOR

- 3-5 years
- 1st-3rd grades
- 4th-6th grades
- 7th-12th grades

1. Number of meetings _____

2. Total attendance _____

3. Number involved in AFFIRMED Prayer Mentoring _____

4. Number of girls working on Curriculum _____

5. Number of girls working on Merit Studies _____

6. Number of students involved in SEALED Small Groups _____

7. Number of students using other COG materials _____

8. Number involved in EQUIPPED 2 LEAD _____