

BWMI Post Event Report

Event Date: _____

Ministry/Contact Name & Number: _____

Event Name & Description: _____

Type of Event:

___ Outreach ___ Standard (funeral, etc) ___ Leadership ___ Other _____

Does this event support Bible Way's vision? Yes ___ No ___ If yes, how?

Loving God: _____

Loving People: _____

Making Disciples: _____

Funding Sources & Amounts (*Attach reconciled budget):

Church \$ _____ Members \$ _____ Sponsors/In-kind \$ _____ Other \$ _____

Total Number of Attendees: _____ Members _____ Guests/Visitors _____

Decisions for Christ _____ Baptisms _____ Holy Ghost Infills _____

Please document what went well with your event. Consider these areas: Planning, Execution, Results/Outcome, Communication, and Marketing

Please document what could be improved if the event were to occur again. Consider these areas: Planning, Execution, Results/Outcome, Communication, and Marketing

Other Notes/Lessons Learned/Suggests Area is editable