



Holy Healthy UMC Healthy Congregation Award
Health Ministries Report Form

CHURCH INFORMATION

Congregation Name _____

Mailing Address _____

City _____ State _____ Zip _____

Church Phone _____ Church Fax _____

Congregation's Website _____

Pastor's Name _____

Pastor's Mailing Address _____

City _____ State _____ Zip _____

Pastor's Home Phone _____ Pastor's Cell Phone _____

Pastor's Email Address _____

Contact Person _____

Contact Person's Mailing Address _____

City _____ State _____ Zip _____

Contact Person's Phone _____ Contact Persons' Fax _____

Contact Person's Email Address _____

District _____ Number of Members _____

HEALTH MINISTRIES REPORT SUMMARY

After completing your report, ***please return to this section and enter the total number of activities reported.*** Churches reporting at least the minimum number of eligible activities, based on membership size, will be designated **Holy Healthy UMC Healthy Congregations**. Minimum number of activities required by congregation size:

100 or fewer members: 10

101 to 500 members: 15

501 or more members: 25

Our total number of activities is: _____

Return this form with your activity reports to: John Wilcher, 226 E. Edwin Circle,
Memphis, TN 38104-5909.