

Associational Follow-Up Report

___ Long Beach Harbor SBA ___ Orange County SBA

PLEASE RETURN WITHIN 30 DAYS OF YOUR EVENT.

Church _____

Date of Event _____ Location of Event _____

Purpose of Event _____

Person making report _____

Cell _____ Cost of event (not including use fee) \$ _____

Attendance;

Event team ___ Children ___ Parents ___ Other adults ___ "E" team ___

Kind of material was handed out? _____

Number:

Witnessing/evangelistic presentations _____ Professions of faith _____

Prospects committed: ___ church ___ Sunday School... ___ small groups

Joint event? ___ If yes, with whom? _____

What type of follow up plans have you made?

How did the EBPT help or hinder your event?
