**Church Information and Partnership Form**

Southern Baptist Conservatives of Virginia

*Please mail all information to:*

SBC of Virginia

Attn: Church Partnership Request

4956 Dominion Blvd.

Glen Allen, VA 23060

*Please attach the following supplemental information:*

[ ]  Annual Church Profile (ACP) from previous year *(if SBC church)*

[ ]  Church Constitution and Bylaws

[ ]  An explanation of the formation and history of the church

**GENERAL CHURCH INFORMATION**

|  |  |
| --- | --- |
| Official Church Name:  |  |
| Date of church or elder vote for partnership:  | [ ]  Unique Partnership [ ]  Dual Partnership [ ]  Church Plant |
| Do you affirm Baptist Faith & Message 2000? [ ] Yes [ ]  No |
| Year church was formed:  | Year the current pastor came:  |
| SBC ID *(if applicable)*:  | Is the church incorporated? [ ] Yes [ ]  No |
| If yes, what is the incorporated church name?  |
| Is anyone on staff currently participating in Guidestone Financial Resources? [ ] Yes [ ]  No |

**CHURCH CONTACT INFORMATION**

**Meeting Location** (*must be the physical address of the church, not a PO Box,* ***to be listed on the SBCV website****.)*

|  |  |
| --- | --- |
| Address:  | City, State, & Zip:  |
| Location:  | County:  |

**Mailing Address (*to be listed on the SBCV website)***

|  |  |
| --- | --- |
| Address:  | City, State, & Zip:  |
| Phone number:  | [ ] Landline [ ] Cell phone |
|  |  |

**Mailing Address for Financial Information**

|  |  |
| --- | --- |
| c/o *Treasurer’s name (if applicable)* | Address:  |
| City, State, & Zip:  |  |
| Phone number:  | [ ] Landline [ ] Cell phone |

**Additional Contact Information** *(please select a minimum of 1 to be posted on SBCV website)*

|  |  |
| --- | --- |
| Primary Church Phone Number:  | Include on SBCV website? [ ] Yes [ ]  No |
| Primary Church Email:  | Include on SBCV website? [ ] Yes [ ]  No |
| Church Website:  | Include on SBCV website? [ ] Yes [ ]  No |
|  |  |

**STAFF AND LAY LEADER CONTACT INFORMATION**

*Please include the preferred address and phone number for contacting the follow staff members or lay leaders. Lay leaders or volunteers may prefer for mailings to be sent to their home address instead of the church.*

**Senior Pastor**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff **OR**  [ ]  Volunteer |
|  | [ ]  Full-time **OR**  [ ]  Bi-vocational |
| Preferred Title: | [ ]  Rev. [ ]  Dr. [ ]  Pastor |
| Home Address:  | City, State, & Zip:  |
| Email:  | Cell phone:  |
| Home phone:  | Birthday *(month and day)*:  |
| Wife’s Name:  | Wedding Anniversary:  |
| Wife’s Email:  |

**Associate or Executive Pastor**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Administrative Assistant to the Senior Pastor**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Church Secretary or Administrative Assistant**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Treasurer**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Head Deacon or Elder**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Music/Worship Ministry Contact**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Education/Discipleship Ministry Contact**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Outreach/Evangelism Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Missions Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Media Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Senior Adult Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Women’s Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Single’s Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**College & Career Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Youth/Student Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Children’s Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State, & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Preschool Ministry**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**VBS Contact**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Address:  | City, State & Zip:  |
| Email:  |  |
| Cell phone:  | Home phone:  |

**Other Staff or Lay Leader**

|  |  |
| --- | --- |
| Name:  | [ ]  Staff [ ]  Volunteer |
| Position:  |  |
| Address:  | City, State & Zip:  |
| Cell phone:  |  |
| Email: |  |

***Please complete the following section if your church is new to the SBC.***

|  |
| --- |
| Please indicate the estimated amount or percentage of your budget you plan to contribute annually to the Cooperative Program. $  |
| Please indicate the amount enclosed with this application if this is your first contribution. $  |
| Total Baptisms last year:  | Total Membership:  |
| Average Worship Attendance:  | Average Sunday School or Small Group attendance:  |
| VBS enrollment:  | Total Mission Project participation:  |
| Total Giving Receipts:  | Total Missions Expenditures:  |

We are in full agreement with the purpose and doctrinal position of the SBCV as stated in Articles II and III of the Constitution and Bylaws (attached at back), and will actively cooperate with the work of this body and the Southern Baptist Convention through financial support.

|  |  |
| --- | --- |
| Pastor Signature:  | Date:  |
| Church Clerk Signature: | Date:  |

**SBCV By-laws (partial)**

**ARTICLE V – GENERAL PROVISION**

**E. Member Church Obligations**

Member churches are urged to be involved and supportive of the direction of the Convention. It is expected that member churches of the SBCV will endeavor to maintain a positive Christian witness and involve themselves in the operation and success of the Convention, and that said participation involve themselves in the operation and success of the Convention, and that said participation involves time investments and financial contributions given regularly as Cooperative Program support through the SBCV. The Executive Board shall be responsible to contact any church failing to maintain a positive Christian witness and/or failing to financially support the Cooperative Program through the Convention for a period of one year, and seek to restore the member church; and, if necessary, recommend to messengers in the Annual Meeting that the church’s affiliation be rescinded.

**SBCV CONSTITUTION (Partial)**

**ARTICLE II - PURPOSE**

As an autonomous state convention cooperating with the Southern Baptist Convention, the SBCV is a fellowship of Southern Baptist Convention churches cooperating to assist local congregations in their task of fulfilling the Great Commission as commanded by our Lord Jesus Christ.

**ARTICLE III - DOCTRINAL POSITION**

We believe that the Bible is the verbally inspired Word of God, wholly without error as originally given by God, and is sufficient as our only infallible rule of faith and practice. We deny that other books are inspired by God in the same way as the Bible. The fundamental truths to which we are committed are expressed in ***The Baptist Faith and Message 2000*** with the clarification of inerrancy as described above. The doctrinal position of the Southern Baptist Conservatives of Virginia shall not be binding upon any local church; however, the Convention recognizes its right and responsibility to determine its identity, including doctrinal parameters, and to include within its affiliation those individual affiliates and churches who can freely agree with it, and to exclude those churches who do not. All employed staff of the Southern Baptist Conservatives of Virginia are expected to agree with and fully support the body's doctrinal position and shall complete a signed statement of doctrinal affinity. Failure to demonstrate concurrence with the doctrinal stance of the Southern Baptist Conservatives of Virginia shall be sufficient reason for termination of employment of any employee of the Southern Baptist Conservatives of Virginia.

**ARTICLE IV - RELATIONSHIPS**

While autonomous in its own affairs, Southern Baptist Conservatives of Virginia, recognizing the autonomy of other Baptist bodies, disclaims all right of exercising authority over any church, association, or convention. However, the Southern Baptist Conservatives of Virginia may rescind the affiliation of any church, which shall, in the judgment of Southern Baptist Conservatives of Virginia, depart in doctrine or practice from the affiliation qualifications set forth in the Constitution and Bylaws.

Southern Baptist Conservatives of Virginia is open to cooperation with other Christian bodies insofar as the SBCV determines that such cooperation does not compromise the doctrinal stance of the SBCV.

**ARTICLE V - AFFILIATION**

1. Affiliation Qualifications. An affiliated church must agree with the foundational beliefs of this Convention set forth in the Constitution and Bylaws. Affiliated churches must actively cooperate with the work of the SBCV through regular financial support.
2. Method of Church's Becoming Affiliated.
3. Any Baptist church desiring affiliation in this body shall complete an affiliation application indicating agreement with the doctrinal position of the SBCV and make an initial contribution to the SBCV. Such application must be received at the state office at least two months prior to the annual meeting.
4. All churches having submitted an affiliation application shall be examined by the Executive Board (or a designated subcommittee thereof) as to their qualifications. If found acceptable, the Executive Board will grant provisional affiliation status to the applicant church. The Executive Board will present all applicant churches to the next annual meeting with an affirmative or negative recommendation.

All churches receiving at least 3/4 affirmative majority at the annual meeting shall be welcomed to affiliation.