



# DEMOGRAPHIC/10-YEAR HISTORY INFORMATION REQUEST FORM

Name _____		Position _____	
Church _____		Association _____	
Mailing Address _____		City, State, Zip _____	
Street Address (If no street address, give directions from a major intersection) _____			
Office Phone _____	Home Phone _____	Fax _____	E-mail _____

Your study area is the geographic area for which you need the demographic data. It should be one continuous area. **Please choose only one of the choices below to specify the study area. Also, please provide a map designating the specific area to be studied.**

1. A circle of radius \_\_\_\_\_ miles centered around your  
 church or  another point: \_\_\_\_\_

OR

2. An area bounded by the following major streets:  
\_\_\_\_\_ on the North,  
\_\_\_\_\_ on the South,  
\_\_\_\_\_ on the East,  
\_\_\_\_\_ on the West.

OR

3. Town, City, or County \_\_\_\_\_

OR

4. Zip Code \_\_\_\_\_

OR

5. Drive Time \_\_\_\_\_ (minutes)

Why do you want this demographic information? What decisions are you considering? What questions would you like this data to help you answer? State your purpose as specifically and completely as possible. (Continue on a separate sheet if needed.) This will help us provide the data that will be most helpful to you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I would like a CD-Rom of the information

I would like an on-screen presentation of the information.

## 10-YEAR HISTORY | Would you like us to include the 10-year history of your church based on ACP figures? Yes No

Interpretation of the demographic information is available by an MBCB consultant. Please contact the Church Growth Division of the Mississippi Baptist Convention Board at 601-292-3216 or 601-968-3800, Ext. 216. This ministry is provided by your gifts to the Cooperative Program.

Please sign: \_\_\_\_\_  
Pastor Date

**THIS SECTION IS FOR DEMOGRAPHIC SERVICE CENTER USE ONLY**  
Date Received: \_\_\_/\_\_\_/\_\_\_ Date Completed: \_\_\_/\_\_\_/\_\_\_  
Date Delivered: \_\_\_/\_\_\_/\_\_\_