**Annual Return Form 2018**

Please return this form by **31 January 2019**.

You can email it to [annualreturns@baptist.org.uk](mailto:annualreturns@baptist.org.uk) or post to Annual Returns, Baptist Union of Great Britain, Baptist House, PO Box 44, 129 Broadway, Didcot, OX11 8RT.

**Please read this form and the explanatory notes carefully**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Church Name** |  | | | |
| **Association** |  | | | |
| *BUGB use only* | *BUGB Church No* |  | *Serial Number* |  |

**Church Information**

Please provide the correct address (including the postcode where known) for the building in which your church meets for worship. Please indicate if this is NOT to be used for correspondence.

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| --- | --- | --- | --- | --- |
| **Church Address and Postcode** |  | | | |
| **Please tick this box if this address should NOT BE USED as a correspondence address > >** | | | |  |
| **Church Office Telephone** |  | **Main contact email address\*** |  | |

\* The email address you give here will be used to send information about completing Annual Returns online next year

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| **Church Website** |  | |
| **Charity Number** |  | *This is only relevant for churches who have registered directly with the Charity Commission.* |

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| --- | --- | --- | --- |
| **Year Church Founded** |  | **Number of people your church building seats** |  |

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| **DATA PROTECTION** |
| Please note that all information collected on this form is entered into our database and available to all staff employed by the Baptist Union of Great Britain, the Baptist Union Corporation and the Baptist Pension Scheme. Staff will respond to individual requests for contact details of BUGB accredited ministers and church secretaries. They will NOT give out names or contact details of unaccredited ministers, church treasurers or anyone else included in the database.  We will NOT pass on the information you provide to any organisation for their marketing or commercial purposes. For more information on the BUGB Data Protection Policy please see our Privacy Statement on our website ([www.baptist.org.uk/privacy](http://www.baptist.org.uk/privacy))  In addition staff from the thirteen Regional Associations have access to this information which they will use in accordance with their own Data Protection Policy and Privacy Statement. |

**People:**

Please make sure that all those whose names and contact details are included on the form are fully aware that you have provided this information to us.

It is very helpful if you can give the title (Mr, Mrs, Miss, Ms, Revd, Dr etc.) for all people you are including on this form as well as providing us with an email address and/or daytime phone number for each one.

If you list someone on this form who started in that role in the last year please give the date (exact or approximate) on which they started. [You can also give start dates for people who started before 2017 if you know them!]

**Minister(s):**

* In this context we are referring to those people who have been formally appointed as Ministers or lay-pastors of your church.
* If relevant please also give any specific **role** they have (e.g. ‘Senior Minister’, ‘Youth Minister’)
* If you are an Ecumenical Church please give the denomination of any non-Baptist Ministers listed here.
* If you have more than one Minister please ‘cut and paste’ the table below and complete with their details.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Full Name** |  | | | | | |
| **Role (if relevant)** |  | | | **Date started** | |  |
| **Address** |  | | | | | |
| **Email** |  | | | | | |
| **Tel. (Home)** |  | | **Tel. (Church/Office)** | |  | |
| **Denomination (if not Baptist)** | |  | | | | |

**Church Secretary/Administrator:** This should be the person regarded as the key contact person for your church irrespective of their actual title. If you have more than one person in this role please just provide details for the main contact person.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** (include title) |  | | **Date started** | |  |
| **Address** |  | | | | |
| **Email** |  | | | | |
| **Tel. (Home)** |  | **Tel. (Church/Office)** | |  | |

**Church Treasurer (or equivalent)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** (include title) |  | | **Date started** | |  |
| **Address** |  | | | | |
| **Email** |  | | | | |
| **Tel. (Home)** |  | **Tel. (Church/Office)** | |  | |

**Home Mission Rep**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** (include title) |  | | **Date started** | |  |
| **Address** |  | | | | |
| **Email** |  | | | | |
| **Tel. (Home)** |  | **Tel. (Church/Office)** | |  | |

**Safeguarding Contacts:**

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| --- | --- | --- | --- | --- | --- |
| **Safeguarding Trustee:** Please provide us with the name and contact details of the person in your church who is the Trustee with specific responsibility for safeguarding issues. | | | | | |
| **Name** (include title) |  | | **Date started** | |  |
| **Address** |  | | | | |
| **Email** |  | | | | |
| **Tel. (Home)** |  | **Tel. (Church/Office)** | |  | |

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| **Designated Person for Safeguarding:** Please provide us with the name and contact details of the person in your church who has this role. If there is more than one please provide their details on a separate sheet of paper and enclose with the form. | | | | | |
| **Name** (include title) |  | | **Date started** | |  |
| **Address** |  | | | | |
| **Email** |  | | | | |
| **Tel. (Home)** |  | **Tel. (Church/Office)** | |  | |

**Other People**

Please let us know if there are people in your church who have been formally appointed in one (or more) of the following roles – normally this would be in a paid capacity. If you have more than one such person, please ‘cut and paste’ the table below and complete with their details

**Children’s Worker – Community Worker - Families Worker – Youth Worker.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** (include title) |  | | | **Date started** |  |
| **Role** |  | | | | |
| **Address** |  | | | | |
| **Email** |  | | | | |
| **Tel. (Home)** |  | **Tel. (Church/Office)** |  | | |

**Statistics:** Please provide us with the relevant figures

|  |  |
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|  | **As at 31 December 2018** |
| Number of church members \* |  |
| Number of children up to 11 years\*\* |  |
| Number of young people (11-18)\*\* |  |

\* If your church is a formally constituted LEP (Ecumenical Church) please provide us with the total number of members in brackets after the number of Baptist members. For example: 25 (80) would mean you have 80 members in total but only 25 of them would count as Baptist members. In some LEPs these figures will be the same as all members are seen as members of all participating denominations.

\*\* Please give the number of children/young people with whom the church has regular contact through church organised activities on Sundays and mid-week - e.g. Sunday school, uniformed organisations, youth clubs etc.

|  |  |
| --- | --- |
| Total number of **believers’ baptisms** in 2018 |  |

|  |  |  |  |  |  |
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| **Attendance at Worship:** *Please complete the table below showing your* ***current average attendance at your main weekly service of worship****. We will leave you to decide how you work this out. For example you could choose a ‘normal’ service and count all those who attend that day or you could work out the average over two or more weeks – or you may have your own method!* ***Please note that the ages in brackets are given as a guide – they are not prescriptive!*** | | | | | |
| **Age Group** | Children – pre-school and primary (0-11) | Young People – secondary school or 6th form (11-18) | Young Adults  (18-30) | Other Adults  (30-65) | Seniors  (65+) |
| **Number** |  |  |  |  |  |

**And finally…please note**

Thank you (in anticipation) for completing and returning this form. If we need to contact the church to check any of the information supplied we will contact the person listed as Church Secretary/Administrator unless you indicate otherwise.

Please make sure that all those whose names and contact details are included on the form are fully aware that you have provided this information to us.

Please let us know the date on which you completed this form.

|  |  |
| --- | --- |
| **Date form completed** |  |