



chicago metro

BAPTIST ASSOCIATION

Chicago Metro Baptist Association Mission Group Request 2012

PARTNERING PROCESS

How to Request Mission Groups

STEP ONE

Pray and seek God's vision for your church.

STEP TWO

Decide how your church is going to carry out God's vision (What is your strategy?).

STEP THREE

Decide how mission volunteers could assist your church in its strategy.

STEP FOUR

Complete this request form and send it to:

CMBA
Mindy Cobb
6559 W. 92nd Street
Oak Lawn, IL 60406

Fax: 708/233-0330
Phone: 708/233-0300

STEP FIVE

Wait for notice of potential match with a mission team.

STEP SIX

Communicate with the team leader and schedule a pre-plan meeting. At the pre-plan meeting:

- a. Share your church's history, vision, & strategy
- b. Discuss the group's part in the strategy
- c. Show the leader around the church & community (housing, dining, laundry, ministry, & recreation options)

STEP SEVEN

Covenant to partner with the mission team leader in the mission effort & divide the preparation responsibilities.

Any questions please contact:

Mindy Cobb 708/233-0300

Mindy@chicagobaptist.com

CMBA 2012 Mission Group Request

Circle one: Church Association Church Start Mission Other: _____				Date	
Church or Ministry Name				Denomination Affiliation	
Address, City, State & Zip				Phone Number	
Primary Contact/Ministry Leader			Address, City, State & Zip		
Work Phone		Home Phone		Fax Number	
E-mail Address					

The best way to contact me is (*circle one*):

Church phone Work phone Home phone E-mail FAX Mail

We request mission volunteer teams for the following dates and ministries or activities (please indicate if the ministry is for the morning or evening):			
BEGINNING DATE	ENDING DATE	MINISTRY or ACTIVITIES (see Outreach Possibilities insert)	TOTAL # OF VOLUNTEERS NEEDED

- -Continued- -

Mission Group Request

I suggest the following housing options that are in our area for the mission groups while serving with US (check all that are available):

___ Church: _____
Name Address Phone

___ School/College: _____
Name Address Phone

___ Park District: _____
Name Address Phone

___ Hotel(s): _____
Name Address Phone

___ Other: _____
Name Address Phone

Please complete and return this application to:

Attn: Mindy Cobb, Chicago Metropolitan Baptist Association (or CMBA), 6559 W. 92nd Street,
Oak Lawn, IL 60453 or 708/233-0330 Fax. (Be sure to make a copy for yourself!)