



*Please complete all information to ensure our files are accurate.*

**• CHURCH INFORMATION**

Church Name: \_\_\_\_\_

Current Physical Address-Church: \_\_\_\_\_

Current Mailing address-Church (If different from above): \_\_\_\_\_

Church phone number: \_\_\_\_\_ Church Fax: \_\_\_\_\_

Church Website: \_\_\_\_\_ Church Email: \_\_\_\_\_

**• SENIOR PASTOR INFORMATION**

Name: \_\_\_\_\_ Title (Dr., Rev., Pastor, Mr.) \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Birthday: \_\_\_\_\_ Anniversary: \_\_\_\_\_

Pastor of this church since: \_\_\_\_\_

Spouse's name, birthday and email: \_\_\_\_\_

**• BOARD CHAIR INFORMATION**

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**• STAFF:**

**Associate Pastor:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Missions Director:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Women's Director:** \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

**Youth Pastor:** \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Church Administrator:** \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Men's Director:** \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

- Church Entity Status (501(c)(3), corporation, other): \_\_\_\_\_  
(List here)
- Name and phone # of person completing this form \_\_\_\_\_

## **FAX FORM**

## **Church Directory Update**

**Please complete and fax this form to: 888-266-3279**

14255 Danielson Street,  
Poway, CA 92064  
Phone: (888) 999-7922  
Fax: (888) 266-3279  
Website: [www.swbc.org](http://www.swbc.org)

Date: \_\_\_\_\_