

## CONGREGATIONAL UNIT UPDATE

Church \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Cluster \_\_\_\_\_ Email \_\_\_\_\_

<p>President _____ Home Phone _____</p> <p>Address _____</p> <p>Email Address _____ Term Expires _____</p>
<p>Vice-President _____ Home Phone _____</p> <p>Address _____</p> <p>Email Address _____ Term Expires _____</p>
<p>Secretary _____ Home Phone _____</p> <p>Address _____</p> <p>Email Address _____ Term Expires _____</p>
<p>Treasurer _____ Home Phone _____</p> <p>Address _____</p> <p>Email Address _____ Term Expires _____</p>
<p><i>Please mail the completed form to your cluster recorder and a copy to the synodical board's cluster liaison and the synodical secretary.</i></p>

## EVALUATION OF CLUSTER EVENT

Event Name \_\_\_\_\_ (check if Spring Cluster Meeting

Or Other Event Name \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

Please rate and comment on the following statements:

	Totally Disagree/Totally Agree				
1. The theme was well carried out throughout the event.	1	2	3	4	5
2. Advance information was adequate.	1	2	3	4	5
3. The agenda was well-paced to include fellowship.	1	2	3	4	5
4. Items and information shared were helpful.	1	2	3	4	5
5. The board representative's remarks added insight.	1	2	3	4	5
6. The facility for the event was pleasant and convenient.	1	2	3	4	5

Please complete the following:

The best part of the event was \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The part of the event that could be improved or changed is \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I would like for the next event to \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

