

# Life Group Profile

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Date: \_\_\_\_\_ Trimester: Winter Spring Fall Year: \_\_\_\_\_

## Life Group Name

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## Contact Information

### Leader

|                       |  |
|-----------------------|--|
| Name                  |  |
| Street Address        |  |
| City, State, ZIP Code |  |
| Home Phone            |  |
| Other Phone           |  |
| E-Mail Address        |  |

### Assistant Leader

|                        |  |
|------------------------|--|
| Name                   |  |
| Street Address         |  |
| City, Street, ZIP Code |  |
| Home Phone             |  |
| Other Phone            |  |
| E-Mail Address         |  |

### Host

|                       |  |
|-----------------------|--|
| Name                  |  |
| Street Address        |  |
| City, State, ZIP Code |  |
| Home Phone            |  |
| Other Phone           |  |
| E-Mail Address        |  |

## Logistics

|                            |                                      |   |                                |
|----------------------------|--------------------------------------|---|--------------------------------|
| When does the group meet?  | Weekly <input type="checkbox"/>      | Twice a month <input type="checkbox"/>  | Other <input type="checkbox"/> |
|                            | Day(s): <input type="checkbox"/>     | Time(s): <input type="checkbox"/>       |                                |
| Where does the group meet? | Host's Home <input type="checkbox"/> | Other Location <input type="checkbox"/> |                                |
| Childcare provided?        | Yes <input type="checkbox"/>         |   |                                |

### Life Group Focus

Please indicate the primary focus of the Life Group. (Check one.)

- Fellowship       Bible Study/Discipleship       Outreach/Community Service

Please indicate other details about the type and focus of the Small Group. (Check all that apply.)

- Topical Study       Church Service       Specific Stage of Life  
 Prayer       Accountability/Mentoring       Special Interest, Hobby  
 Recovery/Support       Relationships       New Believers  
 Adult       Women       Mature Believers  
 Youth       Men       Other (please specify):  
 Parenting       Women and Men

### Life Group Meeting Requirement

Meetings must include one or more of the following elements. (Check all that apply.)

- Prayer       Worship       Bible Study       Sharing testimonials

### Life Group Description

Briefly describe the focus and audience of the Life Group. This is the same description that will be included in the Life Group Directory.

### Core Values of Horizons Community Church

The core values of Horizons Community Church must be reflected in its Life Groups. Leaders and hosts are expected to uphold these guiding principles.

- |            |                    |            |
|------------|--------------------|------------|
| Excellence | Biblical Relevance | Evangelism |
| Ministry   | Small Groups       | Worship    |
| Love       | Prayer             |            |

### OFFICE USE ONLY

|              |       |
|--------------|-------|
|              |       |
| Reviewed by: | Date: |