

“Get Connected” Small Group Report Form

Group Contact Person:

Date of Report:

Meeting Day:

Meeting Time:

Meeting Location:

Small Group Participants List	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Celebrations, Concerns, Comments, Issues	

How can we best assist you in your small group ministry?