A NATIONAL STUDY OF PROTESTANT DENOMINATIONS WITH HISPANIC MINISTRY IN THE USA

SPONSORED BY IDEA-PROLADES MINISTRIES APARTADO 1525-2050, SAN PEDRO, COSTA RICA (506) 2283-8300 – E-mail: prolades@racsa.co.cr Internet: www.prolades.com

QUESTIONNAIRE HSUSA-#4: NEW RELIGIOUS MOVEMENTS

GENE	RAL INFORMATION	[ClassificationCode:]	
1.	Name of Religious Group:		
2.	Affiliated with Mother Church or Denomination:		
		ement of Faith or Creed and fill out onnaire if group is unlisted]	
3.	Street Address of #1:		
	(City)	(State/Zip)	
	(County)	[census tract:]	
4.	Mailing address for #1 (if differ	ent from above):	
	(City/State/Zip)		
5.	Telephone number of church office	/pastor: ()	
6.	FAX number of church office/pastor:()		
7.	E-mail address:		
8.	Internet:		
DESC	RIPTION OF RELIGIOUS GROUP		
9.	Type of congregation: Church	; Mission ; Dept;	
	Other (give name/type):		
10.	Does more than one ethnic congreg	ation use your church facilities?	
	Yes;No Which ones?		
	(please fill out a separate form	for each congregation)	
11.	When was your congregation organi	zed/founded/established?	
	Year: Month:		
12.	How many official members do you	have now?	
13.	(Date/source of statistics: What is your average/normal atten) dance at your main worship service now	
	(all ages)? (Mee	ting Time:)	

- 14. What is the estimated size of your **TOTAL CHURCH COMMUNITY** (including adults, adolescents, children; members and non-members; active attendees, occasional attendees, and those who hardly ever attend, etc. = total constituency): _____
- 15. What is the primary language used in your congregation?
- 16. What nationalities/ethnic groups/languages are represented among those who attend your congregation?

	NUMBER	PERCENT
Largest group:		
Second largest:		
Third largest:		
Fourth largest:		
Fifth largest:		
Sixth largest:		
TOTALS		100%

17. Do you consider yourselves to be a "multi-congregational church?" (one church but different ethnic groups hold their own worship services in their own language): ___Yes; ___No

CONTACT INFORMATION

18.	Name of head official:	
19.	Official's address:	(Street)
	(City) (State/	Zip)
20.	Official's telephone number: ()	
21.	Official's e-mail address:	
22.	Name of person providing the information (interviewee):	
23.	Your telephone number: ()	
24.	Date of interview:	
25.	Interviewer:	

Last updated on June 20, 2011