



Gary Nicholson, Architect

Church Ministry Profile

Please complete the following information to provide the necessary background for your design project, and to help our designers get a better understanding of your current situation and future needs. Feel free to add notes as needed to give a more complete picture of your needs.

Church: _____

Address: _____

City: _____ State: _____ Zip _____

Church phone: (____) _____

Primary contact person for project: _____

Position: _____ email address: _____

Daytime phone: _____ Other phone: _____

Other Contact information:

Staff, Title or Position:	Name	Full or Part time?	Email address	Years at this church
Pastor				

Church's Mission, Vision and/or Purpose Statement:

What is the growth strategy of the church?

5 greatest strengths of this church:

5 greatest challenges for the church:

Property and Site:

Acres of property owned: _____ (attach survey)

Parking spaces on property you own _____

Parking available within distance _____

Parking available/ accessible by shuttle _____

Total parking available _____

Current number of cars at peak attendance time: (count cars during largest service time and report for 3 typical weeks and report below)

	Date	Time of day	Number of cars	Attendance on campus this hour
Week 1				
Week 2				
Week 3				

Worship space:

Current worship center capacity: (number of seats) use 20" per person if seating is on pews.

Congregation: _____

Platform/choir: _____

Total: _____

Instruments used in worship: (describe type and number for each service)

Typical weekly worship attendance by service (for multiple service churches only):

	Time & day	Attendance in Worship Center	Attendance in Children's programs	Total Attendance on Campus this hour
Service 1				
Service 2				
Service 3				
Service 4				

Recent Attendance trends:

	10 years ago	5 years ago	4 years ago	3 years ago	2 years ago	1 year ago	Current Attn
Weekly worship attendance							
Number of services							
Small groups/Sunday School							
Number of sessions							

On-campus small groups:

Age / Division	Age span	Number of classes	Attendance:		
			Hour 1	Hour 2	Hour 3
Preschool	Birth thru ____ yr.				
Children	Grade ____ thru ____				
Students	Grade ____ thru ____				
Adults	Age ____ - up				

Weekday school program:

Current:

Age/Grades ____ thru ____ Number of classes ____ Number of children ____

Future (long range plan):

Age/Grades ____ thru ____ Number of classes ____ Number of children ____

Other needed school facilities:

Fellowship / Recreation

Capacity of current fellowship/dining space: _____

Typical attendance at such events: _____

Do you serve regular weekday meals? __Yes __No Average number served: _____

Do you have facilities designed for recreation? Describe type and frequency of use:

Type of kitchen needed:

___ Snacks & beverages only, ___ Warming kitchen, ___ Full Commercial kitchen

Church Finances:

General fund (not designated) income last full year: \$ _____

Current year annual budget: \$ _____

Present church indebtedness: \$ _____

Present building funds available: \$ _____

Are you currently in a capital campaign? ___ Yes ___ No When will it be completed? ____

Are you planning a capital campaign? ___ Yes ___ No When will it start? ____

Building Project:

Is there consensus for what kind of space is needed? If so, what is it? _____

Describe any unusual current building /space issues:

Describe the church's requirements and priorities for your proposed next building project:

Have you established a target date for construction to begin? Date _____

Which of the following services are you in need of at the current time?

- | | | | |
|-----------------------------|------------------------------|-----------------------------|--------------------------------|
| Consultation | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Maybe |
| Master Site Planning | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Maybe |
| Capital Campaign assistance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Maybe |
| Construction Documents | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Maybe |
| Design-build services | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Maybe |
| Other (specify) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Maybe |

Materials to be supplied by the church:

___ Program information as requested on these forms. Please feel free to add any other relevant information not requested as you deem appropriate. Supplemental forms may be used if neatly printed or typed and contain relevant information.

___ A property survey of the land the church owns or proposes to own. This should be completed by a registered land surveyor showing property boundaries, all existing buildings, improvements, easements, setbacks, contours, finish floor levels, significant trees, sewer and/or septic system, topographic contours, and spot grades of significant features relative to a common benchmark.

___ Accurate floor plans of the existing building on the subject site drawn to a standard architectural scale with overall and interior dimensions. Label each room, show wall thickness, plumbing fixtures, doors and windows.

___ Elevation drawings, if available, showing heights of walls, windows, doors, soffit and roof lines to scale.

___ Local zoning or building code ordinances that may be relevant to the project. Deed restrictions, or other special jurisdictional requirements for the project.

The consultant is not responsible for the accuracy of the information supplied by the church. The information supplied by the church is intended as a means to assist the church in communicating its needs and desires for the project and reflect the church's current understanding at the time of its completion. It does not constitute a binding agreement to direct the services of the consultant, nor an agreement by the consultant to provide specific solutions as may be outlined herein.

Form completed by: _____ Date: _____

Phone Number: _____

Mail completed form to:
Gary Nicholson, Architect
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Nashville, TN 37211

or email to:
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phone: (615) 479-7287