



CENTRAL ZAMBIA CONFERENCE YOUTH MINISTRIES DEPARTMENT

Quarterly Report Form

District Reporting: _____

Closing Date: _____

Number of Churches: _____ Number of Churches Reporting: _____

Number of Companies: _____ Number of Companies Reporting: _____

Number of Branches: _____ Number of Branches Reporting: _____

Club	No. of Clubs this Quarter	Membership this Quarter	Number Invested this Quarter	No. of Camps Held this Quarter	Number Baptized this Quarter	Crusades Conducted by Youths this Quarter	Number Baptized from Youth Crusades
Adventurer							
Pathfinder							
Ambassador							
Master Guide							
Adventist Youth							
Total							

Write below other activities done which are not reported above (Name of the activity, date, attendance, achievements, etc):

1. _____
2. _____
3. _____
4. _____

Report Submitted by: Name: _____ Phone Number: _____

Signature: _____ Quarter Ending: _____

Date Sent: _____