

OAK CREEK CHRISTIAN CENTER LIFEGROUP PROFILE

LIFEGROUP FACILITATOR:			
FACILITATOR'S PHONE (home):			
FACILITATOR'S PHONE (cell):			
FACILITATOR'S E-MAIL:			
LIFEGROUP HOST:			
HOST'S PHONE (home):			
HOST'S PHONE (cell):			
HOST'S E-MAIL:			
STREET ADDRESS OF MEETING:			
CITY:		ZIP:	
DAY GROUP MEETS:			
GROUP MEETING TIME:	START:		END:
FIRST MEETING DATE:			
FREQUENCY OF MEETING:			
CHILDCARE NEEDS OR INFORMATION:			

DRIVING DIRECTIONS (from church)	
1.	5.
2.	6.
3.	7.
4.	8.
<i>CONTACT LEAD PASTOR REGARDING CHILDCARE (IF NECESSARY)</i>	