



**NEWBERRY COUNTY SHERIFF'S OFFICE**  
**PO Box 247**  
**NEWBERRY, SC 29108-0247**  
**CHURCH INFORMATION SHEET**

DATE	NAME OF CHURCH	PHONE
ADDRESS	CITY, STATE	ZIP
PASTOR	EMAIL	PHONE
ADDRESS	CITY, STATE	ZIP

Please list, in order you wish them to be contacted, persons who may be contacted in the event of a problem or emergency at your Church:

NAME	ADDRESS	HOME PHONE	CELL PHONE	WORK PHONE
1) _____ EMAIL: _____				
2) _____ EMAIL: _____				
3) _____ EMAIL: _____				
4) _____ EMAIL: _____				

*NOTE: The Sheriff's Office will only contact the first available contact person.*

Please list the days and times of normal operation at your Church:

DAY	TIME	DAY	TIME
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

Additional Information:

\_\_\_\_\_

Is your Church locked after hours of operation? YES  NO

Are there lights left on at your Church after hours of operation? YES  NO

If "YES", please indicate which ones:

\_\_\_\_\_

Is your Church protected by an Alarm System? YES  NO

If "YES", what Type? (*phone-in, Etc.*)

\_\_\_\_\_

If "YES", do all contact persons have the code or key to the Alarm System? YES  NO

Are there any special problems that the Newberry County Sheriff's Office needs to be aware of to better serve you and protect your property?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Are there any comments or suggestions that you can make to assist the Newberry County Sheriff's Office in better serving you in protecting your Church?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME (PLEASE PRINT)	SIGNATURE	DATE
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