

# Church Teams Application For Participation in Domestic Violence Training

Church name: .....

Church contact name: .....

Address: .....

City: ..... State: ..... ZIP: .....

Phone: ..... E-mail: .....

Relationship to the church: .....

## Church information

Why does your church want to be involved in this training?

What does your church already do to address domestic violence?

If you have a United Methodist Women's group or other women's group in your congregation, have members made a commitment to addressing domestic violence? If so, what have they done? If not, do you think they would be willing to support a church team?

If you have a United Methodist Men's group or other men's group in your congregation, have members made a commitment to addressing domestic violence? If so, what have they done? If not, do you think they would be willing to support a church team?

Do you have another group in your congregation or community that has made a commitment to addressing domestic violence? If so, what have members done? If not, do you think they would be willing to support a church team?



United  
Methodist  
Women

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