

FORM 1: church participation

Please fill in the following information.

Senior Minister's Name: _____

Church Name: _____

Church Email address: _____

Church Phone Number: _____

Church Mailing Address: _____

Contact the churchtogether** office if you would like to have your church removed from the list of participating churches.*

Please nominate a key volunteer from your church, to come alongside the Senior Minister of your church to assist in the event communication to your church congregation.

Key Volunteer/ Staff Member's Name: _____

Contact Information for Key Volunteer: _____

Number of people expected to attend: _____

SENIOR MINISTERS SIGNATURE: _____ **DATE:** _____

Please submit this form by the 11th August 2008 [via post, fax or e-mail]

church**together**

www.churchtogether.com

Post: PO BOX 524 Victoria Park, WA 6979

Tel: (08) 9416 0088

Fax: (08) 9416 0007

E-mail: email@churchtogether.com