

MINISTRY INVITATION FORM



DATE OF INQUIRY: ____/____/____

MINISTRY/CHURCH NAME: _____

PASTOR'S NAME: _____ CONTACT'S NAME: _____

CHURCH ADDRESS: _____

NUMBER CITY STATE ZIP

CHURCH PH#: (____) _____ CONTACT PH#: (____) _____

FAX# (____) _____ FAX# (____) _____

EMAIL: _____@_____ WEB SITE: _____

TYPE OF SERVICE AND DATES:

SERVICE TYPE (circle please): Revival Conference Retreat Convention Other: _____

YOUTH SINGLES WOMEN'S MISSIONS/MISSIONARY

LEADERSHIP MINISTERIAL MUSIC MINISTRY Other: _____

Sun Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Mon Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Tues Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Wed Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Thur Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Fri Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Sat Month____Date ____ Time____ Ministry Request: Preach Teach Other: _____

Time Allotted to Minister: _____ Expected number of attendees: _____ to _____

THEME: _____ SCRIPTURE: _____

OTHER: _____

COMMENTS: Thank you for considering Nicole Barnes for your ministry needs. This form is to assist her prepare to serve you. It is important to return this page as soon as possible for immediate response. Please be advised, this is not a confirmation to minister. Upon review of this form and prayer, you will receive a response as soon as possible (within 7 days). If you have any questions, feel free to call Danielle Whiteside, 502.419.6672. God Bless You!