

**Faith Revival
Christian Church**

Home Group Leaders Slip

A: Tick as applicable

- To Lead
and/or
 Home As Venue (Go to **C**)

B: Name of proposed leader:

Co-leader (if applicable):

C: Details

Home
Address: _____
_____ Post code: _____

Phone: _____
Mobile: _____
Email add: _____

If Member, please indicate if
your landline is to be listed in
Church-members Directory?

- Yes No

Signed: _____ Date: _____

This information is collected for the
primary purpose of assisting Staff
to fulfil their pastoral role, duty of
care and administration. FRCC
abides by the National Privacy Act
2001. For further info, Please
contact the Church Office.

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