

MUCH MORE MINISTRIES

Please Tell Us About Your Event

Sponsor: _____
Address: _____

Phone: _____
Fax: _____
E-Mail: _____

Please specify how **Much More Ministries** can serve you:

<input type="checkbox"/> Keynote Speaker	<input type="checkbox"/> Break-Out Speaker
<input type="checkbox"/> Couples Event	<input type="checkbox"/> Conference Presenter
<input type="checkbox"/> Singles Event	<input type="checkbox"/> Women's Event
<input type="checkbox"/> Financial Seminar	<input type="checkbox"/> Panel Participant

Please state specific details of responsibilities for **Jo Lynn Bright** at your event:

Location of the event: _____

Date(s) of the event: _____

Start Time: _____ AM/PM
End Time: _____ AM/PM

How many participants are anticipated? _____

Contact Person: _____ Phone: _____
E-Mail: _____ Fax: _____

Please submit completed form via any methods below.

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E-Mail: info@muchmoreofhim.org