

House/Office DEDICATION Form

Please complete the following section & submit this form to the Church Office.

| 1. | Member's Name | |
|----|-------------------------------------|-------------------------|
| 2. | Contact details: | : |
| 3. | Location of house/office | |
| | If Office, name of company | : |
| 4. | Date / Time | 1 st Option: |
| | | 2 nd Option: |
| 5. | Estimated number of pax | |
| 6. | CG Net & CG Leader | |
| | | |
| S | Senior Pastor Approval: Semarks: | Date: |