



NATIONAL EVANGELISM WITH SOJOURNERS
CHURCH OF CHRIST SOJOURNER MISSION

5554 Cooks Road
Telephone: (903) 935-5742
office@sojourning.org

Marshall, TX 75670-9130
Fax: (903) 935-7367
www.sojourning.org

INSTRUCTIONAL REQUEST FOR HELP

Name: _____ Date __ / __ / __
Congregation / School / Camp

Geographic Location (Specific) _____
Actual location of the building, I.E., Road, Street, Highway, etc.

Mailing Address _____ Phone (__) _____
Street, Route or PO Box City State Zip

Population: _____ Location (area of state or miles from large city): _____

Person to contact: Elder, Leader, or Preacher Best Time To Call: _____

Name Address Title Phone

Preacher: _____ Full Time ___ Part Time ___
Name Address Phone

A signed Waiver of Liability must be signed (see reverse side).

I. CHURCH INFORMATION ONLY:

A. Number of members _____ Attendance Sunday AM _____ PM _____ Wednesday _____

B. What percent of the congregation represents the following age categories?
10 yrs - 19 yrs _____%; 20 yrs - 39 yrs _____%; 40 yrs - 60 yrs _____%; over 60 yrs _____%

C. Check the Instructional work you would like the Sojourners to do:

- Listening Lab
Christ Applied Successful Living
Personal Evangelism Workshop
How to Study the Bible Through God's Covenants
Church Leadership Development
Spiritual Growth Workshop
Equipping the Saints
Evangelism Workshop
Early Childhood Christian Development
Teaching Bible Lessons with PowerPoint
Singing Workshop
Christian Parenting
Other - Please list your need not listed above:

II. PARKING INFORMATION:

- A. Can we park our RV's on the church parking lot? _____ How Many? _____
- B. Are hook-ups available at the above location? _____ How many? _____
- C. Do the hookups have electric (30 amps) _____ Water _____ Sewer _____
- D. Is a permit needed from the Governmental Authorities to park RV's on the church parking lot or at your organization's location? **(must answer)** _____. If yes, has this permit been obtained? _____
- E. If needed, is there an RV park nearby? _____

III. DATES:

A. The Sojourner that will teach your request, will contact you -

Use the remainder of the page for any information or explanation needed. _____

Requested by: **(Signature Required)** _____ Phone (____) _____
[Elder] [Deacon] [Preacher] [Member] [Director]

**Waiver of Liability
For Sojourner Work Request**

We, _____ release and forever discharge National Evangelism
(Name of Entity Requesting Sojourn)

with Sojourners (NEWS), its administrators, staff, and all other persons, none of whom admit liability, from any and all claims, demands, actions, causes and action or suits of any kind or nature whatsoever and particularly on account of all injuries, damages, theft or deaths, known and unknown, both to person and property, which have resulted, or may in the future develop, from any accident or loss which might occur as a result of any work event or activity voluntarily performed by NEWS on the undersigned's property. The undersigned hereby declares that these terms have been completely read and are fully understood and voluntarily waive all claims, stipulated or otherwise, on account of the injuries, losses and damages above mentioned, and for the express purposes of precluding, forever, any further or additional claims arising out of any possibility of accident, loss, or damages by the undersigned.

By signing below I agree that I have read and thoroughly understand all of the above.

Name of Entity Requesting Sojourn

Date

Authorized Signature

Title