

SMALL CHRISTIAN COMMUNITY

Sign-Up Card

Name: _____

Address: _____

City/Zip: _____ Subdivision: _____

Phone: _____ E-mail: _____

I would like to host a small community in my home

Either choose a group by your Day and Time Preference

Day: Mon Tues Wed Thurs Fri Sat Sun

Time: Morning Afternoon Evening

OR choose a group by your Special Interest

Neighborhood Married Couples Men Women Moms

en Español Young Adults Seniors