

## Girls Ministries Coordinator Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Birthdate \_\_\_\_\_

How many years have you served as Coordinator? \_\_\_\_\_

Do you currently serve as Children's Pastor? \_\_\_\_\_

Church Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Pastor's Name \_\_\_\_\_

Do you prefer mailings to be sent to the church address or your home address? \_\_\_\_\_

Are you planning to attend our 2009 District Stars Camp or Friends & GO Camp (now called TGM Camp)? \_\_\_\_\_ If no, why not? \_\_\_\_\_

Please complete the following information and return to:

NCN Assemblies of God

Attn: Girls Ministries

6051 South Watt Avenue

Sacramento, California 95829

Fax to 916-503-2852/Email to keinsel@agncn.org

*Girls Ministries*

*Lives in the Making*