

RECOMMENDATION FOR SUNDAY MORNING SERVICE

Topic: _____

Is this time-sensitive?: _____

Suggested speaker(s):

What is the best way to address this person (contact information):

Street Address: _____

City: _____ State: _____ Zip _____

Website (if applicable): _____

Mission of speaker's organization:

Why do you think this person/topic would make a good Sunday Service?

In what way will the congregation be transformed by this service?

What impact will this service have on individuals? The congregation? The community at large?

Name of submitting person or committee: _____

Phone: _____ Cell: _____ Email: _____

Please attach any additional documentation or information you have on the topic and put the completed form in the Worship Associates mail slot. Thanks! The Worship Associates Team will get back to you.