Journey Registration Form

Name		
Address		
City	St_	Zip
Phone (_)	
Email		
Preferred me	eting location (in	dicate 1 st , 2 nd and 3 rd) choices:
Church		Adamsville/Forestdale
Gardendale/N	\t Olive	Warrior/Corner
Sumiton/Dorc	ı	Hueytown/Pleasant Grove
Other		
Preferred me	eting night (indic	ate 1 st , 2 nd and 3 rd) choices:
Sunday Wednesday I have no pre [.]		Tuesday Friday Saturday
Please indicat	e if you prefer a d	day time meeting at the church
<u>Can you help:</u>	2	

Would you be willing to help lead a group if needed? _____ Would you be willing to host a group in your home if needed? _____

Thank you for participating in the Journey Program!