



Evangel Prison Ministries

“Go ye into all the world.” Mark 16:15

INTERCESSORY PRAYER VOLUNTEER INFORMATION SHEET

Please fill out this form completely. ☺

Name _____ Date of Birth _____

Address _____ Best time to contact you _____

City _____ State _____ Zip _____ Phone _____

Email: _____ Your Marital status _____

How many prayer request sheets do you want to start with? 5 [] 10 []

Church Name & Address _____

Pastor's name _____ Telephone _____

Pastor's Email: _____ Years Known _____

REFERENCE: *If you are a member of Evangel or another church, please give a reference of a member there who has known you for at least a year.*

Name _____ Phone _____

Address _____ Email _____

Please give us a brief testimony of your salvation experience and approximate date you were born again:

BEFORE SIGNING THIS FORM:

I, _____, agree that I will faithfully pray over the needs of the inmates (or the ministry itself) as they come in for a 30 day period. I understand that this is a very serious commitment – not only to the prison ministry, but to the Lord Jesus Christ.. I hereby certify that I am at least 18 years of age, a born-again Christian, and in regular attendance at my home church.

Signature _____ Date _____