

## His Song Ministries Invitation Information

Please complete and **return this with your Letter of Invitation** to:

519 Urbane Road NE, Cleveland TN 37312    phone (423) 559-0173    fax (423) 559-8599    Booking@judyjacobs.com

**NOTE: PLEASE FILL OUT THIS FORM COMPLETELY IN ORDER TO HELP US FACILITATE THE PROCESSING OF YOUR INVITATION**

Today's Date: _____	Previous ministry at your church:    Yes    No
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<b>Name &amp; Mailing</b> Address of Organization:	
<b>Physical</b> Address of Organization:	

Sr. Pastor's Name:	Church Affiliation:
Telephone:	Cell phone:
Fax:	Email:

Total # of **Adults** in your congregation \_\_\_\_\_

**List the Time(s) of the Ministry Event:**

**What day of the week?**

**Check mark days M    T    W    Th    F    Sa    Sun**

Web Address:	Church Email:
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Contact Person:	Title:	Email:
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<b>Dates you are requesting:</b>	<b>2nd Choice:</b>	
Other guests invited on these dates:		
<b>Physical Address where these meetings will be held:</b> _____ _____		
<b>Meeting Venue capacity:</b> _____	<b>Media advertising:</b> _____	<b>Color photos requested:</b> _____

Meeting Format:    Regular services    Retreat    Conference    Other:

Meeting Schedule: Day & Time	Regular <b>adult</b> attendance	Expected <b>adult</b> attendance

Please detail your experience in planning this kind of event, include guests hosted:    For additional space use space below

Equipment available:	Audio	Super VHS Video	Betacam Video	Digital Beta	DVCAM
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