



# Global Assist Network Prayer Intercessor Form

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Do you attend church regularly  Yes  No

What church do you attend? \_\_\_\_\_

May we contact your pastor for a reference?  
 Yes  No

If no, please let us know why \_\_\_\_\_

If yes, please give us your pastor's name and telephone number \_\_\_\_\_

Please furnish us with two additional references; names and telephone numbers \_\_\_\_\_

\_\_\_\_\_

What about Global Assist Network makes you want to be involved as a prayer intercessor? (Use separate sheet if necessary) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Country/countries of special interest: \_\_\_\_\_

**Please read over the following commitment statement. If you believe you are to be part of our Intercessory Prayer Team, please sign where indicated and either mail or fax this document back to us.**

*After praying about my possible involvement with Global Assist Network as an Intercessory Prayer Team member, I believe that this is a commitment I am to make. I understand that by signing this form I am committing to pray for Global Assist Network on a DAILY basis.*

*I would like to receive special prayer needs, and give you permission to send these needs to me by email as they become available.*

*If I find that I am unable to keep this commitment, I will notify you and ask to be removed from the Intercessory Prayer Team.*

\_\_\_\_\_  
(signature)

Return form to: Global Assist Network - P.O. Box 348 - Springfield, MO 65801 or fax to 417-725-8763

