

SPEAKING ENGAGEMENT REQUEST FORM FOR
Pastor Patrick H. Greene Sr.

Thank you for your interest and consideration of having Pastor Greene minister at your upcoming service / event.

Please fill out the form below and submit to Pilgrim Valley Administrative Office to be reviewed.

MINISTRY INFORMATION

Organization/ Church Name: _____

Address: _____

Telephone Number: _____ Fax / E-mail: _____

Pastor or Leader _____

Ministry Denomination or Affiliation: _____

Church / Organization Web-site: _____

Contact Person / Event Coordinator: _____

Telephone Number: _____ E-mail: _____

Address: _____

EVENT INFORMATION

Type of Event: _____ Theme: _____

Dates (s) requested to minister: _____ Appropriate Dress: _____

Event Location Address: _____

Schedule for Service / Event: _____

Other Scheduled Speaker (s) if any: _____

Brief Description of event: _____

Any special instructions? _____

Serving Christ by
Serving Our Community

*******Please review your form before submitting. This is a request only and does not serve as a confirmation. You will be contacted in regards to this request upon receiving your letter.**