

Easter Holy Convocation

Place of Refuge

Nissi Centre, Along Mararraban Rido, Kachia, Box 7332, Kaduna, Nigeria

Easter Liaison Office:

38B Owerri road, Nnewi, Anambra state, 08037243119, 08038727473

Registration Form – Adult

(Please Fill in CAPITAL Letters)

Zone: _____

Part A – Personal Data

1. Names:
 - a. Surname: _____
 - b. First Name: _____
 - c. Middle Name: _____
2. Sex: ☐ Male; ☐ Female
3. Age (yrs): ☐ Below 20; ☐ 20-30; ☐ 31-40; ☐ 41-50; ☐ above 50
4. a. Marital Status: ☐ Married; ☐ Single; ☐ Widow; ☐ Widower; ☐ Separated; ☐ Other
b. No. of yrs married: ☐ 1-5; ☐ 6-10; ☐ 11-15; ☐ above 15
5. Number of Children: _____
6. Residential Address: _____
7. Office Address: _____
8. Postal Address: _____
9. Town of Residence: _____
10. LGA of Residence: _____
11. State of Residence: _____
12. Country: _____
13. Email: _____
14. Telephone Number(s): _____
15. Profession/Vocation: _____
16. Do you need accommodation?: ☐ Yes ☐ No
17. List the years you have attended Holy Convocation: _____
18. Are you in a Discipleship Relationship?: ☐ Yes ☐ No
19. If yes, who is your disciple and where do you attend discipleship?: _____
20. Signature/Date: _____

Part B – Spiritual Data

21. Are you Born Again?: _____ If yes, when (DD/MM/YY)?: _____
22. Are you filled with the Holy Spirit? _____
23. Local Assembly/Ministry? _____
24. In what capacity are you presently serving the Lord (Nature of Ministry)?

25. Which area(s) of your spiritual life can be of assistance to you? _____
26. In what area(s) are you a resource person (for resource persons only): _____

For Official Use Only:

1. Bible Study Group: _____
2. Workshop Group: _____
3. Registrar: _____