Ministry Service Request Form

1. Contact Information

- **Ministry Name:** _____
- **Senior Leader/Pastor:** _____
- **Contact Person (if different):** _____
- **Phone Number:** _____
- **Email Address:** _____
- **Website or Social Media (if any):** _____

---

2. Ministry Location

- **Street Address:** _____
- **City, State, ZIP:** _____

---

3. Type of Request *(Check all that apply)*

☐ On-site Teaching Session
☐ Leadership Workshop
☐ Multi-Week Course Instruction
☐ Conference Speaker/Panelist
☐ Virtual Teaching Session
☐ Curriculum/Resource Use Only
☐ Other: _____

---

4. Preferred Topic or Course Area *(Check all that apply)*

☐ Biblical Foundations

☐ Fivefold Ministry Training
☐ Evangelism & Outreach
☐ Prophetic Development
☐ Leadership & Ministry Ethics
☐ Spiritual Gifts
☐ Marriage & Family
☐ Youth/Young Adult Discipleship
☐ Other: _____

5. Proposed Date(s) and Time(s)

6. Estimated Number of Attendees

7. Technology & Equipment Available On-Site *(Check all that apply)*
☐ Projector/Screen
☐ Microphone/Sound System
☐ Internet Access
☐ Tables/Chairs
☐ Whiteboard or Flipchart
☐ None Available

8. Additional Notes or Special Requests

9. Authorization

By submitting this form, I affirm that I am an authorized representative of the requesting ministry and agree to communicate and coordinate with Destiny Institute in good faith for the requested engagement.

- **Printed Name:** _____
- **Signature:** _____
- **Date:** _____

Please Submit This Form To:

📧 **Email:** destinyministriesga@yahoo.com

📞 **Phone:** (478) 255-3427