



**PROMISE  KEEPERS**  
**PARTNERSHIP CHURCHES**  
**SIGN-UP FORM**

**CHURCH DETAILS:**

PK ID# (if known) \_\_\_\_\_

Church Name: \_\_\_\_\_ Pastor's Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**GROUP LEADER:**

PK ID# (if known) \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**Yes**, I'd like to take up the offer of **one** free registration to *INFLUENCE* 2016 Men's Event (Group\* of 7-14) or **two** free registrations (Group\* of 15 or more) and will supply name(s) when available.  
\*Group may include Pastors, Students and Transition.

Event:  CHRISTCHURCH 19-20 August  WELLINGTON 9-10 September  AUCKLAND 7-8 October

If possible, please advise Youth Pastor's details so we can provide information relevant to young men:

**YOUTH PASTOR:**

PK ID# (if known) \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

I would like a Promise Keepers representative to contact me to chat about leveraging the PK Event experience - to look at how the Event can really build ongoing growth and transformation in the lives of the men in my church.

I confirm that our church leadership is supportive of this Promise Keepers Event.

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office use:  Sent certificate  On website  Rego 1  Event DVDs  Reserved seating  Rego 2

**Phone:** 09 300 7337 or 0800 PROMISE (0800 77 66 47)

**Email:** pk@promisekeepers.org.nz **Web:** www.promisekeepers.nz **Post:** PO Box 163083, Lynfield, Auckland 1443