



# 2009 Church Partnership Agreement

Church Name \_\_\_\_\_

Church Address \_\_\_\_\_

\_\_\_\_\_

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

Church Web Page: \_\_\_\_\_ Church Fax: \_\_\_\_\_

Senior Pastor Name: \_\_\_\_\_

ShareFest Waco Contact Name: \_\_\_\_\_

Contact Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

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

YES! We wish to partner in ShareFest Waco 2009. We will:

\_\_\_ Participate in a ShareFest workday project in the community on Saturday, May 2.

\_\_\_ Lead our congregation to participate in the food, box fan, and blood drives.

**Please fax this form to (254) 848-2682.**

***THANK YOU for participating in this important community service event. We look forward to working with you in preparation for May 2.***