

Contact Data Form

Consent

I consent to the organisation, at present known as "Thrive", holding and making use of my contact details to be in touch with me, and sharing them within the managing group.

Yes or **No** (please delete the one that does not apply)

Information Requested

Name

(Forename and Surname)

Email address

Postal Address

Post Code

Telephone (optional - landline or mobile)

Church /College Details

Name of Church/College

Spouse's role (present or previous)

(eg, Minister, Youth pastor, Missionary,
Mission /Outreach worker
Lecturer, Retired pastor, Previous role etc.)

Own role (if applicable)

Preferred contact method

Email / Post (please delete as appropriate)

We would like to contact as many people as possible by email, in order to reduce our postage costs, but please tell us if you prefer to be contacted by post and we will continue to do that.

Thank you for filling this in. Please email us at thrive.baptist.networks@gmail.com with your details and your consent to contact you, or post the form to Thrive, c/o Judy Wright, 4 Chesterfield Close, Winsford, Cheshire, CW7 2NS.