

FUUSA Small Group Ministry Signup— 2012-13

Name: _____ Phone: _____

Email: _____

I would like to be in a group that starts meeting: ___THIS FALL ___THIS WINTER ___THIS SPRING

Please enter preferred meeting time in the table below. Rank preferences with one as highest.

	Sun	Mon	Tues	Wed	Thur	Fri	Sat
Morning							
Afternoon							
Evening							

Have you been in a small group ministry/covenant group before? YES NO

Please return this to FUUSA office, 405 Washington Avenue, Albany, NY, 12206

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