



Lighthouse "A present light that brings L.I.F.E. to men" *Church International*

Ministry Itinerary

Date(s) of Ministry: _____ Time(s) of Service(s): _____

Type of Service(s): _____ Theme of Service/Event(s): _____

Event Location: _____

Apostle flows in a building type anointing for ministries. What areas of focus does your ministry need now?

What guest ministries have ministered at your church? _____

Are there any special events/fellowships planned following the service(s)? Yes _____ No _____

If yes, what and where? _____

Meeting Info

Pastor(s) Name: _____

Ministry Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Senior Pastor's Convenient and Direct Telephone Number for Emergency Purposes: _____

Will there be an honorarium gift presented? _____ If so, what should be expected? _____

Audio/Video

Will the services be audio recorded? Yes _____ No _____ Will services be video recorded? Yes _____ No _____

If recorded, we request that a copy of the audio and/or video of the service(s) be made available to Apostle Greene's adjutant immediately following the meeting(s). Thank you for your cooperation.

Airport/Ground Transportation

Airport – Nearest Your Location: _____

Distance from Airport to Church/Event: _____

Rental Car Expense: __N/A__

Distance from Hotel to Church/Event: _____

Person(s) Greeting Pastor West

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Hotel Info

Name of Hotel: _____

Telephone Number: _____ Fax Number: _____

Address: _____

(Street)

(City)

(State)

(Zip)

Names of restaurants and attractions near hotel: _____

Room Confirmation#: _____ Reservation Date: _____

Preferred items located in room: 2 beds, hi speed internet, and refrigerator. Also to prevent waiting in lobby, please have Apostle checked in room upon arrival. **Email forms completed back to:**

kelvinday@lighthouseci.org