



PLOT 17 BIRABI STREET, GRA PHASE 1, PORT HARCOURT.  
P.O.BOX 13670: **Tel:** +23480 390 08190, +234803-312-3743

**THANKSGIVING FORM**

- 1. Name (Mr &Mrs):.....
- 2. Contact Address:.....
- 3. Occupation:.....
- 4. Phone No.....
- 5. Sex:.....
- 6. Marital Status (Single, Married, Divorced, Separated, Widow, Widower:.....
- 6a. If Married, What Type Of Marriage Was Celebrated:.....  
(Traditional or Court or Church)
- 6b. Have You Been Married Before? (Yes  /No  ) If Yes, What Happened To Your Former Spouse?  
.....
- 7a. Name& Phone No of Your Parents In-Law or Those Who Stood In That Position:.....
- 7b. **Purpose of Thanksgiving:** .....
- 8. Is Your Spouse Also a Member of The Church:.....
- 9. Office Address:.....
- 10. Home Fellowship Name & Address.....
- 11. Position in The Home Fellowship Centre:.....
- 12. Date Of New Birth (When You Became Born Again): .....
- 13. Have You Attended Foundation Or New Believers Class Before? .....
- 14. Are You Baptized By Immersion?.....If Yes, When? .....
- 15. Are You Baptized In The Holy Ghost? (Yes/No) If Yes, When?.....
- 16 A. Have You Attended Bible School?.....If Yes, When?.....
- 16b. Where Did You Attend Bible School?.....
- 17. Membership (Tithe) Number ..... 18. When Do You Intend To Give Thanks?.....
- 18. **NAME OF BRANCH CHURCH WHERE YOU ARE THANKING GOD:** .....

**ATTENTION: FELLOWSHIP LEADER AND THANKSGIVER**

- 1. Photographers/Camera men and women may not be allowed to cover your thanksgiving. All video/camera coverage are done by the church. Copies will only be made available solely on demand.
- 2. **Pictures that depict actual marriage celebration must be attached in case of thanksgiving in relation to child birth at least two weeks preceding the day of Thanksgiving.**
- 3. No thanksgiving form should be submitted to the church office after the expiration of two weeks to the day preceding the thanksgiving.
- 4. Thanksgiving is always the **2<sup>ND</sup> SUNDAY** of every month except otherwise announced.
- 5. No alcoholic drinks or beverages must be served by any person thanking God under any guise; otherwise, you place yourself under a curse and become blacklisted by the church concerning future celebrations.

**Please, comply with the above rules to avoid embarrassment.**

**ATTESTATION BY HOME FELLOWSHIP LEADER**

Name..... Signature of Fellowship Leader:.....

Signature of Thanks giver .....Date.....

Official Remarks.....



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**THANKSGIVING FORM FOR CORPORATE FELLOWSHIP**  
**CENTRES (C.F.C) AND CORPORATE BODIES (C.B.)**

- 1. NAME Of C.F. OR C.B.....
- 2. ADDRESS Of C.F. OR C.B.....  
.....
- 3. NAME OF HOST/HOUSTESS OF C.F. ....  
.....
- 1. PHONE NUMBER (S) OF THE HOST/HOUSTESS OF C.F. ....  
.....
- 2. NAME OF THE LEADER OF C.F. OR C.B .....
- 6. ADDRESS AND PHONE NUMBER(S).....
- 7. DATE YOU INTEND TO GIVE THANKS.....
- 8. PURPOSE OF THANKSGIVING.....  
.....
- 9. NAME OF BRANCH CHURCH WHERE YOU ARE THANKING GOD:.....**  
.....
- 10. NUMBER OF PERSONS EXPECTED TO ACCOMPANY C.F. LEADER OR LEADER OF CB:.....
- 11. IS YOUR LEADER BORN AGAIN.....IF YES, WHEN? .....
- 12. WHICH CHURCH DOES YOUR LEADER ATTEND.....
- 13. HAVE YOU GIVEN THANKS IN THIS CHURCH BEFORE?.....IF YES, WHEN?.....
- 14. SIGNATURE OF G.S.F.C OR C.B LEADER.....
- DATE .....
- OFFICIAL REMARK .....