

ANNEXURE E

Proposed Area of Support

Church Name: _____

Name of Missionary: _____

Address: _____

Tel no: _____ Fax no: _____

E-mail: _____

Name of Organisation: _____

Field: _____

Marital Status: _____ Age: _____

Children:

<i>Name</i>	<i>Gender</i>	<i>Age</i>
_____	_____	_____
_____	_____	_____

Involvement Objectives:

(If you don't have these, ask the organisation to send them to you.)

Expected time frame of their involvement (Long-term, short-term, etc.):

How do you intend to support them?

1. Through prayer

- Special prayer group
- Prayer needs on overhead projector in church
- Church prayer meeting
- Monthly missions prayer activity

2. By encouraging them

- Visiting them
- Inviting them to visit you
- Writing letters