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Ministry Engagement form for Bishop E. D. Richardson

Please fill this form out in its entirety and fax or email the completed form to EDR Ministries. All requests for Bishop Richardson to minister at your event will receive a prompt response.

Church/Ministry Name: _____

Date of Event: _____

Purpose for Event: _____

Event Theme: _____

Address of Event: _____

Telephone#: _____ **Email** _____

Contact Person: _____ **Contact #:** _____

Pastor/Overseer: _____

Church/Ministry Denomination: _____

Church/Ministry Website Address: _____

How long has the Church been established? _____

What is the estimated number to be in attendance? _____

Will Bishop Richardson be asked to raise the offering? Yes _____ No _____

What is the stipend/love offering to be given to Bishop Richardson? _____

Bishop's traveling expenses and hotel accommodations are to be covered in advance. Yes _____ No _____

Please make all checks for love offering and/or traveling expenses paid to EDR Ministries.

For Office Use Only:

Date of request: _____ Date Received: _____

Is date available? Yes _____ No _____

Are expenses covered? Yes _____ No _____