

# Women's Day Out Information Form

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:**   **Daytime/Wk** \_\_\_\_\_

**Evening** \_\_\_\_\_

**Cell** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**Food allergies or dislikes** \_\_\_\_\_

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**Attire is casual and comfortable.**

**An opportunity will be provided to sow a love offering into the ministry as the Lord  
directs you.**