

Do You Have a Program to Share? Application Form

Name:

Address:

E-mail

Phone:

Please provide *up to TWO* pages in response to the following:

1. Please describe your program. What was the vision and goals?
2. Who were the participants? How often did you meet?
3. What outcomes did you hope for?
4. Please comment on how your program touched one or more of these values:
 - a. *Help people see where God is in the midst of change*
 - b. *Nurture Christian Education/Faith formation in a diverse church*
 - c. *Call us to listen to the Spirit and respond faithfully*
 - d. *Call us to honesty in the midst of changing times*
 - e. *Encourage risk taking as we try new things*

The Maritime Conference Christian Life & Growth Committee will review applications several times each year.

Please send your application to:

**E-mail
Mail:**

jmaclea@marconf.ca
Janice MacLean
Maritime Conference Office
32 York Street
Sackville, New Brunswick
E4L 4R4

