

The NMB Inter-congregational NMB 24/7 Prayer Watch Response Form:

Name of Congregation/Group:

Name of Church Leader/Group Leader:

Contact number:

Participation in the NMB 24/7 Inter-congregational Prayer Watch: Please complete this form as it applies to the congregation or group that you represent and email, fax or post it to the NMB: Transformation Christian Network Office.

1. Our congregation **would like to participate** in the Prayer Watch.

2. Our congregation/group would like to participate on:
(Please **circle** the day; the week/weeks and hours)

- a) *Sunday / Monday / Tuesday / Wednesday / Thursday/ Friday / Saturday.*
- b) *Week One/Week Two/ Week Three/ Week Four /or every second week /or every week.*
- c) *How many hours will your congregation/group fill on the day/days that you have chosen? hours.*

During which hours will your congregation or group be praying?

From To.....

Or other random hours

Example: Our congregation will pray for 5hrs on Wednesdays during Week Two and Week Four starting from 06h00 to 11h00.

3. Our congregation/group would / would not make use of the **24/7 Prayer Pamphlet.**

Thank you for your participation.

**NMB: Transformation Christian Network, 71 Main Road, Walmer 6070
Phone/Fax: 041 581 5726 Email: info@tcn.org.za**