



"DOING IT ALL FOR THE GLORY OF GOD"
 P.O. Box 2503
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 312-286-4265

ALL 4 HIM Ministries, Inc. Referral Directory Contact Listing Info.

Please complete the following Contact Information as thoroughly as possible in order to begin the Registration Process for the A4HIM Referral Directory.

INDIVIDUAL OR GROUP

LAST NAME _____ FIRST NAME _____

GROUP NAME (If Applicable) _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL ADDRESS _____

PRIMARY PHONE: _____ ALTERNATE PHONE: _____

CHECK CATEGORY TO BE FEATURED IN:

- ◆ CHRISTIAN COMEDIAN _____
- ◆ GOSPEL ARTIST OR GROUP (DANCE/MIME) _____
- ◆ GOSPEL ARTIST OR GROUP (SONG) _____
- ◆ MUSICIAN _____
- ◆ MUSIC PRODUCER _____
- ◆ MUSICIAN _____
- ◆ SPEAKER _____

____ Yes, ALL 4 HIM MINISTRIES, INC. has permission to use my contact and profile information exclusively for its Referral Directory. This information will not be sold to solicitors without my knowledge or written consent.

SIGNATURE _____ DATE _____

CHRISTIAN BUSINESS

BUSINESS NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL ADDRESS _____

PRIMARY PHONE: _____ ALTERNATE PHONE: _____

CHECK CATEGORY TO BE FEATURED IN:

- ◆ BUSINESS PRODUCTS _____
- ◆ BUSINESS SERVICES _____
- ◆ BUSINESS PRODUCTS & SERVICES _____

____ Yes, **ALL 4 HIM MINISTRIES, INC.** has permission to use my contact and profile information exclusively for its Referral Directory. This information will not be sold to solicitors without my knowledge or written consent.

SIGNATURE _____ DATE _____