



## Major Gifts Prospect Referral Form — Individuals

Prospect Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Local Church \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Area of Interest:

The Stillspeaking Initiative

Leadership Development

New and Renewing Churches

Justice

Comments \_\_\_\_\_

I am willing to participate in the cultivation of this individual.

Your Name \_\_\_\_\_ Date \_\_\_\_\_

Your Telephone Number: \_\_\_\_\_



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