

Date _____

MEN ON A MISSION (MOAM)
of
EMMANUEL FAITH COMMUNITY CHURCH
APPLICATION FOR SERVICE

MOAM is a ministry of Emmanuel Faith Community Church and is committed to *building the Kingdom of God one nail at a time*. We consider it a privilege to consider how we might serve you in the name of Jesus Christ our Lord. In order to help us in responding to your request, please take a few minutes to answer the following questions.

1. Name of your ministry _____
Mailing address _____

Contact person _____ Wk Phone _____
Hm Phone _____ E-Mail _____
Cell _____

2. Please enclose a copy of your ministry's purpose and doctrinal statements.

3. Is the project property owned by the above ministry? Y N
If not owned, please give the terms of the lease _____

4. Will all building materials be available at the project site? Y N

5. Are all required permits procured (i.e., building, plumbing, electrical, mechanical, etc.)? Y N
if not, when will the permits be in hand? _____

6. If this project necessitates an overnight stay on the part of our men (and possibly women or families), is housing available? Y N If "yes", where? _____

Are there hook-ups for RV's, if necessary? Y N How many? _____

7. Would meals be provided? Y N

8. Is there possible work for our wives or families should they come? N
What would be the nature of the work? _____

9. Will a contractor, or other supervisor, be on site? Y N Who? _____
Contractor's Home Phone _____ Work Phone _____
Fax _____

10. Please write a 3-4 sentence summary of your ministry and how this project will benefit your ministry. (We will use this to communicate the value of this project as we recruit workers.) _____

11. What is the estimated starting and ending date of the project?
Start _____ End _____
Ideally, what dates would you need our help? _____

12. How many workers will be required? _____

13. What specialties are needed? (Framers, plumbers, electricians, etc.) _____

14. Are there others who will also be involved in the project? Y N
If "yes", please briefly describe their involvement? _____

15. Please feel free to share any other information that may help us in making a decision as to whether or not we can be of assistance to you.

16. Name of Person Filling Out Form _____

Phone: _____ Email _____

WHERE DO WE GO FROM HERE? Once we have this completed form in hand, it will be brought to the MOAM leadership board for discussion. If the project is accepted by the board, then the general MOAM membership will be informed of the project allowing those interested in helping to express that interest. We would then get back in touch with you with more specifics as to how MOAM may be able to assist you.

Again, **thank you** for allowing us to partner with you in building the Kingdom of God.

Please return this Application to:

Emmanuel Faith Community Church
Ministry to Men
639 E. 17th Ave.
Escondido, CA 92025
Main: (760) 745-2541
Alt. Phone: (760) 781-2127
Fax: (760) 745-0464
Email: jjohnson@efcc.org or mark.s.pearsey@gmail.com