

GROWTH IN PRAYER AND REFLECTIVE LIVING 2024-25

APPLICATION FORM

| NAME |
|--|
| ADDRESS |
| |
| |
| |
| POSTCODE |
| TELEPHONE |
| EMAIL |
| *AGE 20-39 □ 40-49 □ 50-59 □ 60-69 □ 70+ □ |
| AGE 20-37 [40-47 [30-37 [00-07 [70+ [|
| *OCCUPATION/VOLUNTARY WORK/MINISTRY |
| *DENOMINATION (if any) |
| *These questions are optional but help us with future planning |
| Please say a little about yourself and why you would like to do this course? |
| How did you hear about the course? |

| - | receiving, or have you ever received, spiritual direction? How do yo experience? |
|---------------------|---|
| What do | you hope to gain from this course? |
| _ | rovide the name and email address for two people who would be will a referee on your behalf. |
| After acc | ts can expect an informal interview either in May/June or September. eptance a £75 deposit is required which is deducted from the total fee (£4) |
| The rema | inder can be paid in full or by instalments. |
| Date | |
| Please re | turn your completed form to: Sheena Headden: gprl@epiphanygroup.org |
| Spaces a Septemb | re limited on this course. Therefore we advise you to apply by 1st er 2024 |
| For detai | ils of how we handle your personal information check the <u>Privacy Notice</u> ite |
| | |