



PASTOR CLIFFORD O. CHAPPELL

“The thief cometh not, but for to steal, and to kill, and to destroy;
I am come that they might have life,
and that they might have it more abundantly.”
(John 10:10 – KJV)

Speaker’s Request Form

Thank you for your support of Cliff Chappell Ministries. To ensure all information is communicated accurately, we ask that all speaking requests for Pastor Chappell be made in writing. Please complete this form in its entirety (*or as best as you can*).

If you have questions or need clarification on information requested on this form, please contact Cliff Chappell at 360-260-1493 or via email at cchappell55@msn.com. Please fax completed form to 360-828-1185.

Name of requesting organization: _____

Name of contact person: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Best Number to reach you: _____ Cell Home Work

Alternate Phone Number: _____ Cell Home Work

Fax Number: _____ E-mail address: _____ Website: _____

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What services are you requesting of Cliff Chappell Ministries? _____

What dates are being requested: _____

What are the specific day(s) and time(s) you are requesting?

Event: _____ Date: _____ Day of Week: _____ Time: _____ to _____

Event: _____ Date: _____ Day of Week: _____ Time: _____ to _____

Event: _____ Date: _____ Day of Week: _____ Time: _____ to _____

Event: _____ Date: _____ Day of Week: _____ Time: _____ to _____

Event: _____ Date: _____ Day of Week: _____ Time: _____ to _____

CLIFF CHAPPELL MINISTRIES
Office Address: 9486 N. Buchanan Ave, Portland, Oregon 97203
Mailing Address: 9486 N. Buchanan Ave. Portland, OR 97203
Phone: 503-247-8337 or 360-281-5205
e-mail: cchappell55@msn.com

What is Pastor Chappell's role as a participant?

- Keynote Speaker
- Guest Evangelist
- Panelist
- Other (please explain: _____)

What is your specific request?

- | | | |
|--|------------------------------|-----------------------------|
| Pastor Clifford O. Chappell | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Missionary Diana Chappell | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pastor Clifford O. Chappell and Missionary/Evangelist Diana Chappell | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Praise-N-Action (Music Ministry Team) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Comments: _____

What is the theme (if applicable)? _____

What is the Scriptural text (if applicable)? _____

What topic would you like Pastor Chappell to address? _____

Approximately how many people will Pastor Chappell address? _____

Briefly describe the audience (i.e. Pastors, congregation, community leaders, etc.): _____

Please describe the location for the event (i.e. church, banquet room, auditorium, etc.): _____

Please describe the audio and visual system in the event location: _____

Will your organization pay:

- | | | |
|--|------------------------------|-----------------------------|
| Travel expenses for Pastor Chappell | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Travel expenses for Missionary/Evangelist Diana Chappell | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Arrange and pay accommodations for both? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Meals and/or refreshments for Pastor Chappell, Diana Chappell? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| An honorarium? (_____) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| May ministry items be sold (i.e., tapes, books, etc.)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Travel expenses and accommodations for Praise N Action | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Comments: _____

WE WILL GET BACK TO YOU AS SOON AS POSSIBLE WITH A RESPONSE TO YOUR REQUEST.

THANK YOU!

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