**CCLC Thanksgiving Service request Form (TSRF)**

This form should be filled and submitted online.

Name………………………………………………………………………………….

Address……………………………………………………………………………….

Post Code…………………………………………………………………………….

Telephone number………………………………………………………………

Email Address………………………………………………………………………

Team in Church (If applicable)………………………………………………

Reason for Thanksgiving………………………………………………………

…………………………………………………………………………………………….

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…………………………………………………………………………………………….

…………………………………………………………………………………………….

Date for Thanksgiving…………………………………………………………..

**For official use only**

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