



**Shawl
Ministry**

**PRAYER SHAWL MINISTRY
FIRST CHURCH OF CHRIST, CONGREGATIONAL
PO BOX 401
NORTH CONWAY, NH 03860
TEL: 603-356-2324**

PRAYER SHAWL REQUEST

Contact Information of Person Requesting:

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ **ZIP:** _____

TELEPHONE: _____

Requesting: shawl _____ square _____ for the following person:

NAME: _____

LOCATED: _____

AGE: _____ **MALE:** _____ **FEMALE:** _____

**WHY WOULD THIS PERSON BENEFIT FROM A PRAYER
SHAWL/SQUARE?**

Please mail completed form to:

Prayer Shawl Ministry
First Church of Christ, Congregational
PO Box 401
North Conway, NH 03860