



Men's / Women's

Sponsor Name: _____ Phone: _____

Solo Christo Sponsor Information Sheet

This is a required part of the Solo Christo Candidate Application Form. Please return this application along with your candidate's application and your \$10 Sponsor Fee to your servant-leader representative.

Name: _____

Sponsor Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Email: _____

Church Name: _____

In the space below, please describe how your are currently serving as a witness for Christ?

- Have you previous sponsored someone? Yes / No If yes, please give the most recent year: _____
- Have you read and understand the scope of your responsibility as outlined in the "How to be a Responsible Sponsor" document below? Yes / No
- Will you commit to prepare and support your candidate for their Solo Christo weekend? Yes / No
- Will you commit to the responsibility to place your candidate in a 4th Group & Gathering? Yes / No

Signature: _____ Date: _____

- To be completed by servant-leader representative -

Do you recommend this Sponsor for TABLE LEADER? - Yes / No

Why or why not? _____

Do you recommend this Sponsor for COMMITTEE LEADER? - Yes / No

Why or why not? _____

Comments: