



www.evecenter.org

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Eve Center West: Price Hill 4904 Glenway Ave. Storefront of Pregnancy Center West, Inc.

BIBLE STUDY or BOOK STUDY REGISTRATION FORM

(HEART and HATCH have separate forms. Call the office for details.)

Name of Study/Group: _____
Your Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____ Cell/work: _____
E-mail: _____ Age: _____

So we can get to know you better, please briefly state why you have chosen to participate in this Bible Study or Support Group: _____

Thank you for being here. Your presence is a confirmation that this program is needed. If you are able, please consider a donation of \$25.00 for the study/group materials and snacks. Eve Center is funded by contributions by individuals, churches and organizations.

Your leaders are volunteers. They are not professionals and should not be a substitute for professional psychological, psychiatric, or medical care. They are here to share with and support you with Scripture and prayer.

Please sign here to show you have read this and understand this is a program operated by volunteers.

Signed: _____ Date: _____

Would you like to be added to our mailing list? (circle one) Yes No

Below Office Use Only

Intake received/date: _____
In group: Yes No Waiting list: Yes No
Completed study: Yes No Incomplete: Yes No
Added to database: Yes No Reason: _____