



## Epiphany Ministries of Texas Wall Agape Request

Unit Requesting Agape \_\_\_\_\_

Weekend Number \_\_\_\_\_ Date \_\_\_\_\_

Agape Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Preferred delivery method:    Email \_\_\_\_\_ Mail \_\_\_\_\_

Requested delivery date \_\_\_\_\_

Please send completed form to:

Paula Swanson  
1942 CR 390  
Denver City, TX 79323

Email: [pjc903@aol.com](mailto:pjc903@aol.com)  
Phone: 806-592-3900  
Cell: 806-543-2631