



# 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

Kate Mellina  
709 Wheatland Dr.  
McGregor, TX 76657

Email: [Katemellina@gmail.com](mailto:Katemellina@gmail.com)

Cell: 254-855-8009

Please leave message, I will call you back.