

Name:	
Address:	
City, State, Zip:	
Home Phone:	
Work/Cell Phone:	
Job Title:	
E-mail:	
May we use your Name	and Job Title in conjunction with your endorsement? Y N (All other info is strictly confidential.) Testimony/Endorsement
1 Please use the space h	below to write a brief testimony about what your Omega Experience meant to you and why you would
recommend it to others	
	God reveal to you most clearly as a result of Omega, and what are you going to do about it? your Omega experience in one word what would it be?
	Further Involvement
The ministry of the Life	e Spring Network exists because of the prayer, service and financial generosity of people who believe
in the need for reproduc	ctive disciple making locally and abroad and have helped bring this experience to you! Would you be
willing to support the sp	pread of our ministry in the following ways? Check those you feel God leading you to do:
Prayer: Being an ac	tive part of our intercessory prayer team!
Volunteer: Helping	us administrate our ministry, put on seminars and spread the word to others!
Financially: Pay for	ward your ministry experience and help us to bring Omega and this ministry to more people!
I	would like more information about other LSN Seminars and Services:
Mentoring Connec	etion: Understanding Biblical Mentoring
Empowered Servan	thood: Understanding Spiritual Gifts
-	derstanding Biblical Financial Stewardship
•	ure: Relationship Excellence in Ministry Teams
	about engaging in one-on-one Mentoring/Life Coaching

Selecting one of the above automatically registers you to receive our monthly e-newsletter which keeps you abreast of what is happening in our ministry and keeps you updated on other courses and seminars in the region! We will contact you to follow up with your desire to get involved. We understand that by submitting your endorsement, we may use all or portions of it for research, donor and promotional purposes.