555 West Redondo Beach Blvd, Suite 130 Los Angeles, CA 90248 www.eecica.org

EECI'S INTERNATIONAL PRAYER VIGIL
TALENT & SPEAKER RESPONSE

Thank you for your willingness to share your gifts and participate in our International Prayer Vigil. Your information will be added to the performance list, and we will communicate any scheduling details with you.

PARTICIPANT INFORMATION

Full Name: _____ **Organization (if applicable):** _____

Email: _____ **Phone Number:** _____

Address: _____ **City:** _____ **Zip:** _____

TYPE OF PARTICIPATION (CHECK ALL THAT APPLY)

❑ **Singing** ❑ **Prayer**

❑ **Dance** ❑ **Spoken Word / Poem**

❑ **Other** _____

PARTICIPATION DETAILS

Title or Description of Performance:_____

Song Title (if applicable):_____

Number of Participants(if applicable):_____

PREFERRED TIME FRAME (EVENT HOURS: 9:00 AM – 6:00 PM)

Please indicate your preferred time frame to perform:

❑ **9:00 AM – 12:00 PM** ❑ **12:00 PM – 2:00 PM**

❑ **2:00 PM – 4:00 PM** ❑ **4:00 PM – 6:00 PM**

❑ **Flexible — Any Available Time**

ADDITIONAL INFORMATION

Special Request or Equipment Needed:_____

ACKNOWLEDGMENT

❑ **I understand that my preferred time frame is a request and may be adjusted based on the event schedule.**