

Operation Blairmore *Application Form*

Please complete this form and return it to us, or provide the same details on our web-form (www.ellelministries.org/ob) or via email (operation.blairmore@ellelministries.org)

First Name:	Surname:	
Title: <i>Mr/Mrs/Ms/Miss/Other</i> :		
Address:		
	Postcode:	
Tel:		
Email:		
Marital status: [] Single [] Marri	ed []Divorced []Remarried	[] Widow(er) [] Separated
If married, would you come: [] a	lone or [] with your spouse	
Spouse's name:		
Church/Organisation involved in:		
Position in church/organisation:		
How did you hear about Operati	on Blairmore?	
Please provide details of a per support your application:	sonal friend or colleague wh	o would confidentially
First Name:	Surname:	
Title: Mr/Mrs/Ms/Miss/Other:	Date of Birth:	
Address:		
	Postcode:	
Tel:		
Email:		
Relationship to You:		

Please use the reverse of this form to provide brief details of your current situation, explaining why a place at Blairmore House could help you at this time.

I would also like to receive information from the work of Ellel Ministries International from time to time and am happy to do so via [] Post [] Email (tick all that apply).

If you have any questions or concerns regarding your application, please contact the Ministry Office at Blairmore House.

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