GENERAL CONTACT FORM

**Name:** Click or tap here to enter text.

**Date:** Click or tap here to enter text.

**Position:** Click or tap here to enter text.

**Organisation or Community:** Click or tap here to enter text.

**Organisation or Community Website:** Click or tap here to enter text.

**Organisation or Community Address:** Click or tap here to enter text.

**Email Contact:** Click or tap here to enter text.

**Phone Contact:** Click or tap here to enter text.

**Please briefly state your reason for contacting Independent Christian Counsel:**

Click or tap here to enter text.

[ ]  All the information that I have entered into this form and submitted is genuine, true and correct.

**Once this form is completed please convert it into PDF form and submit it to:**

chinasom.elekwachi@outlook.com