CAP money:course
Church course agreement

RESOURCING YOUR CHURCH

1 Church details

Church name: _____

Typical Sunday congregation size: Adults: _____ Children: _____

Denomination: _____

Church address: _____ Postcode: [ ][ ][ ][ ][ ][ ][ ]

Church Email: [R][E][Q][U][I][R][E][D][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]
[ ] Telephone: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

If your church is new to the CAP Money Course, continue to section two. If your church already runs the CAP Money course then please go to section three.

2 Church courses agreement To be completed by the church's senior leader

Name: [ ]

Email: [R][E][Q][U][I][R][E][D][ ]
[ ] Telephone: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

[✓] I have read CAP's statement of faith and confirm that I am in agreement with it.
(The statement of faith can be found on the back page of this document)

Our church already runs (tick all that apply) [✓] CAP Debt Centre [✓] CAP Job Clubs [✓] CAP Release Groups [✓] CAP Life Skills

What prompted your church to come and train to do the CAP Money Course? _____

God is changing lives in communities just like yours. We'd love to share the joy and how you can be part of bringing good news to the poor! [Y][N] Email [Y][N] Post [Y][N] Phone [Y][N] Text

Book a CAP speaker

[✓] I am happy to hold a CAP Money Course launch talk in the church by having a guest speaker come and inspire the congregation about God's heart for the poor and highlight CAP's work.

Our two suggested dates for a talk are: Option one [D][D][M][M][Y][Y] Option two [D][D][M][M][Y][Y] (we'll be in touch with you to confirm)

Signature: _____ Date [D][D][M][M][Y][Y]

3 Payment Required for all churches training

Item	Price	Quantity
Paid place	£45	
Group services coach (JC/RG/LS)	Free	
Debt centre*	Free	
CAP Money Gold (up to three places)	Free	

*CAP Debt Centres get three free spaces upon opening and one free place per year thereafter

[✓] I have provided payment for _____ places by cheque/card* for the amount of _____

*If you wish to pay by card please call 01274 760567

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capmoneycourse.org

budget. save. spend.

01274 760567   info@capmoneycourse.org   f facebook.com/CAPuk   🐦 @CAPuk

4 Team details Required for all churches training

Name of Lead CAP Money Coach
(the person who will have the most contact with CAP) _____

Training day location: _____ **Training day date:** `D D M M Y Y`

Coach details 1

Name: _____

Address: _____

_____ **Postcode:** `[ ][ ][ ][ ][ ][ ][ ]`

Telephone: `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]` **Mobile:** `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]`

Email: `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]`

Dietary requirements: _____

God is changing lives in communities just like yours. We'd love to share the joy and how you can be part of bringing good news to the poor! `Y N` Email `Y N` Post `Y N` Phone `Y N` Text

Signature: _____ **Date** `D D M M Y Y`

Coach details 2

Name: _____

Address: _____

_____ **Postcode:** `[ ][ ][ ][ ][ ][ ][ ]`

Telephone: `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]` **Mobile:** `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]`

Email: `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]`

Dietary requirements: _____

God is changing lives in communities just like yours. We'd love to share the joy and how you can be part of bringing good news to the poor! `Y N` Email `Y N` Post `Y N` Phone `Y N` Text

Signature: _____ **Date** `D D M M Y Y`

Coach details 3

Name: _____

Address: _____

_____ **Postcode:** `[ ][ ][ ][ ][ ][ ][ ]`

Telephone: `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]` **Mobile:** `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]`

Email: `[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]`

Dietary requirements: _____

God is changing lives in communities just like yours. We'd love to share the joy and how you can be part of bringing good news to the poor! `Y N` Email `Y N` Post `Y N` Phone `Y N` Text

Signature: _____ **Date** `D D M M Y Y`

Church endorsement To be completed by the church's senior leader

Name: _____

☑ I confirm that these people attend our church regularly and that I am happy for them to train to become a CAP Money Coach.

Signature: _____ **Date** `D D M M Y Y`

Working with other churches

☑ We are working with the following other churches to run the CAP Money Course
(please include each church name and postcode. Continue on separate sheet if needed).

Church name: _____ **Postcode:** `[ ][ ][ ][ ][ ][ ][ ]`

Church name: _____ **Postcode:** `[ ][ ][ ][ ][ ][ ][ ]`