



**GLORY REIGN 2022**  
**VIEWING CENTRE REQUEST FORM**

**DATE----**/----

NO:

**Satellite Church** \_\_\_\_\_

**PERSONAL DETAILS:**

Name \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Address: \_\_\_\_\_

**VENUE DETAILS:**

Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_

Available Facilities: \_\_\_\_\_

Old /New was it used during the last edition of Five Nights of Glory?.....

**VENUE CONTACT DETAILS:**

Name: \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Email Address: \_\_\_\_\_

**OFFICIAL USE**

Remark

**UNDERTAKING TO INDEMNIFY THE REGISTERED TRUSTEES OF  
SALVATION MINISTRIES**

I, /we (.....) hereby confirm  
**Name of donor/name of representative of owner**

that I have the authority and consent of the owner .....  
(name of owner) of the (.....**facility-  
mention it**), which said property is hereby voluntarily released by me to the  
Registered Trustees of Salvation Ministries(hereinafter referred to as the  
Church) to be used throughout the days of Glory Reign, 2022.

Pursuant to the above, I,/we .....)  
hereby undertake to indemnify the Church against any action, liability,  
loss, damage or suit in the event of any person establishing a better title  
asserting an adverse claim over the said property.

**Signed by me:**

Signature/Date:.....

Name:.....

Address:.....

Occupation:.....

***In the presence of Witness:***

Signature/Date:.....

Name:.....

Address:.....

Occupation:.....

Name of Pastor:.....

Name of Satellite church:.....

Signature/Date:.....