



**OSCEOLA GRACE CHURCH
SMALL GROUP LEADER APPLICATION**

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

E-MAIL ADDRESS _____

PHONE _____

CELL PHONE _____

DATE _____

WHY DO YOU WANT TO BE A SMALL GROUP LEADER? _____

WHEN DID YOU DECIDE TO FOLLOW CHRIST? _____

WHAT HAS GOD BEEN TEACHING YOU LATELY? _____



ROMANS 12:10