

Proclaim–Africa

The Colossian Challenge Response Form

Name: _____

Church: _____

Phone: _____

Email: _____

P.O. Box _____

Date of commitment _____

Please tick where you will be involved

- ☐ I commit myself to read Colossians at least twenty (20) times and to complete the Colossian Challenge Syllabus.
- ☐ I will pray for the Colossian Challenge
- ☐ I will recruit other people to be involved in the Colossian Challenge.

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