

**Form 34**

**Prayer Care and Meeting Request**

Record the sharing choice before circulation. Do not place sensitive details in public channels.

Name and preferred contact

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Request and meeting preference

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Urgency and practical needs

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Sharing private designated leaders or public

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Exact details approved for sharing

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Consent and follow up preferences

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Assigned care worker

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Follow up date and restricted reference

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Record reference \_\_\_\_\_ Attachments \_\_\_\_\_