The Navigators of New Zealand Everyday Discipleship Application Form

The Privacy Policy of The Navigators of New Zealand states that all information provided on this application form will be kept in a secure manner and will not be revealed without the express permission of the applicant

A.	GENERAL INFORMATION	ı	
Name	Last	<u> </u>	
	of Birth: Year Month		Middle
Addre	ess:		
	City		Postal Code
Phone	e: <u>(</u>)	E-Mail:	
B. PE	RSONAL SPIRITUAL HISTO	ORY	
1. Spi	ritual Journey/Testimony: De	escribe how and when you bed	came a follower of Christ.
2. Wh your r	at activities do you engage ir elationship with the Lord?	n on a regular basis that you fii	nd nourish and encourage

C. MINISTRY PERSPECTIVE

1. Have you ever been personally discipled or been involved in discipling another person? What were one or two highlights from this experience? Also share if you have had a negative experience in discipling or being discipled.	
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D. NAVIGATOR POLICIES

1. Are you willing to commit to the requirements of the course to complete the assignments, to attend monthly meetings and contribute to group discussions, and to trust God to find someone to begin to help grow as a disciple of Christ? Y N

Please feel free to read our statement of faith (located on our website) to ensure that you are aware of the theological positions of The Navigators organization.

Disclosure Information:

By signing this application I certify that the information provided is true and correct. I understand that The Navigators of New Zealand will rely on this information when determining whether or not to accept my application for The Everyday Discipleship Training Course 2024.

Applicant's Signature:	Date:
Name (Please Print):	

Application form must be mailed or submitted via email before **Friday February 2**, **2024**, to Brian Wachter:

Address: 18 Eric Gifford Drive, Ranui, Auckland 0612

Email: brian@navigators.org.nz