



# Hearts & Hammers Request for Service

All information needs to be completed for request to be considered.  
The person requesting the service should be the one to complete the information.

Date: \_\_\_\_\_

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

Contact Name (if Different): \_\_\_\_\_

Contact Phone number: \_\_\_\_\_  
Home

\_\_\_\_\_ Work

\_\_\_\_\_ E-mail address if available

\_\_\_\_\_ Fax number if available

Address of Project: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Number in Household: \_\_\_\_\_

Significant info about Requestor: (i.e. health, special needs, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NRUMC Member? \_\_\_\_\_

Description of Service Requested: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Time frame requested for service/work to be completed: \_\_\_\_\_

Able to pay for materials needed? \_\_\_\_\_

How did you hear about this ministry? \_\_\_\_\_

Why do you need help with this project? \_\_\_\_\_

Directions from North Raleigh United Methodist Church: \_\_\_\_\_

\_\_\_\_\_

<b>For office use only:</b>	
Date reviewed: _____	Team Leader project assigned to: _____
Release Form received: YES ___ NO ___	Date Team Leader contacted: _____