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| **Brief outline/purpose of the Group:** | |
| **Name of** Connect Group**:** | |
| **Person Hosting the Group:** | |
| **Host’s Contact Details**  **Email:**  **Phone:** | |
| **Frequency of Group within the Term:** *Weekly, Fortnightly, Monthly* | |
| **Which Day or Evening will the group take place:** | |
| **Time group will meet and for how long:** *e.g. 7:45pm to 9:30pm* | |
| **Meeting Place:** | |
| **How many weeks within the Term:** *Full Term: 10 weeks, if shorter, how long?* | |
| **Maximum number of people in the group:** |  |
| **Does this include the Host(s)? Yes / No** |

Please return to the Office or email to connectgroups.rugeleycc@gmail.com