Lizella Baptist Church Ministry Application

This application is to be completed by all volunteers working with members under 18 years of age. It is to be used to help the church provide a safe and secure environment for children who participate in our programs and use our facilities. All information will be kept confidential and stored in a secured location. Thank you for your time and interest in volunteering at LBC!

Name First Last Cell phone_		Female Today's	
		Text ok?	ves no
Address			
Street City State		Date of Birth	mm/dd/vvvv
·	·		3,,,,
Occupation Employer			
Spouse's name (if applicable)		Phone	
First Last			
No. of children Ages	_		
Emergency contact	Phone		
First Last			
Sunday School (9:45) Extended Care (11 Age/Grade Preferences: Nursery Toddler/Prese 6 th -8 th Grade 9 th -12 th Grade			e
Spiritual History			
Have you accepted Jesus as your Lord and Savior? yes no)		
How are you growing in your relationship with Christ?			
Church History			
How long have you been attending LBC?	<u>—</u>		
Have you attended a Membership Matters?yesno		Are you a member?	yesno

ist any special talents, background knowledge, spiritual gifts and/or training. How do you envision these being utilized in ministry?				
		tly First Aid Certified?yesno		
Personal References/Informat Must be at least 18 years old and not rela				
1. Name		Relationship		
Phone	Email			
2. Name		Relationship		
3 Name		Relationship		
Phone	Email			
1. I will maintain my personal regularly attend worship set 2. I will pray regularly for the 3. I will cooperate in a spirit of 4. I will arrive at my place in respect to a suffer and function of 5. I will make every effort to a suffer and function contained in this applicate expectations. I authorize any references, give any information regarding my characteristics.	relationship with Christ the rvices. ministry and those I am refunity and loving support ninistry on time and be well attend all volunteer trainination is correct to the best churches, or instructions are, background, and fithing my services on behalf	with my staff and volunteers. ell-prepared, striving to present God's Word clearly. dren to whom I am responsible. ng and enrichment classes offered. t of my knowledge, and I will do my best to fulfill the above listed on this application, including law enforcement agencies, to ess to serve in Children's Ministry. I agree to follow LBC policies and of the church, as well as protect our ministry by reporting any		
Applicant's signature		Date		
Please return this form to a staff memb	er or the church office.			
	Office U	Jse Only		
Peferences Checked Date:	by (st	aff member)		
ackground Check Passed Date:				
olunteer approved not appr	roved – reason:			