Church Ministry Form PDF

Church Details

- Church Name: ______
- Date of Submission: ______

Personal Information

- Full Name: ______
- Date of Birth: _____
- Gender:
 Male
 Female
 Other
- Phone Number: ______
- Home Address: ______
- City, State, ZIP: _______

Ministry Interest

- Which ministry would you like to join?
 - □ Worship Team
 - □ Children's Ministry
 - □ Youth Ministry
 - □ Hospitality Team
 - ☐ Media Team
 - □ Outreach Program
 - □ Prayer Group
 - □ Other:
- Availability (Days & Times): _______

•	Why do	you	want to	serve	in	this	ministry	/?
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References

• Name: ______

- Phone: ______
- Relationship: _____

Pastoral Approval

□ Approved □ Not Approved

Comments: _____

Pastor's Name & Signature: _____