



Kid's Ministry Volunteer Application 2019

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

What level of commitment are you prepared to make?

Weekly Bi-Weekly Monthly Quarterly Substitute

In which area of ministry are you interested in serving?

Ipad Check in Station

9:20am 10:45am

(This is a 20min commitment before each service begins)

Greeter

Sunday Morning

____ Teacher ____ Co-Teacher ____ Assistant

Infants __9:20 or __10:45

Kindergarten & 1st Grade __9:20 or __10:45

Walkers __9:20 or __10:45

2nd Grade __9:20 or __10:45

Toddlers __9:20 or __10:45

3rd Grade __9:20 or __10:45

Pre Kindergarten: __9:20 or __10:45

4th & 5th Grade __9:20 or __10:45

ABLE Buddy (Special Needs Ministry)

930-950am Gospel Project - Large Group Leader

Wednesday Night Programs (7:00-8:15pm) September -April

Scooters (Pre K-K)

Voyagers (1-2nd Grade Boys)

Voyagers (1-2nd Grade Girls)

Pioneer Girls (3rd – 5th Grade Girls)

Stockade Boys (3rd – 5th Grade Boys)

References: Please list the names and address of three adults who can testify to your character and your suitability for working with children. **(No more than one relative please)**

Name	Relationship To You	Phone #	Address

Questions:

1. What is your relationship to Central? (We ask that you have been in attendance for 3 months before volunteering in our Kids Ministry)

Member Regular Attendee

2. Why are you interested in serving as a volunteer at Central?

3. What experience(s) have you had in ministry to children and/or youth?

4. Can you briefly describe when you came to know Christ as your Savior?

5. Have you ever been convicted of a criminal offense? No Yes (If yes, please explain)
