

## VOLUNTEER

| Name (first)  | (middle)                |                             |         | (last)  |  |           | ☐ Male Date of Birth (m/d/yr) |                 |                |                |  |
|---|-------------------------|-----------------------------|---------|---|--|-----------|-------------------------------|-----------------|----------------|----------------|--|
| Address   |                         |                             |         |   |  |           | Marita                        | emale<br>al 💷 [ | <br>Divorced   | ☐ Married      |  |
| City  |                         |                             |         |   |  |           | Status                        | s: 🗖 \<br>State | Vidowed<br>Zip | ☐ Single       |  |
|   |                         |                             |         |   |  |           |                               |                 | 2.10           |                |  |
| Your Email (Please print.)  |                         |                             |         |   |  | Occupa    | ition                         |                 |                |                |  |
| Spouse (first)  | (                       | middle)                     |         | (las  | st)  |           |                               |                 | Date of E      | Birth (m/d/y   |  |
| Spouse's Email (Please print.)  |                         |                             |         |   |  | Occupa    | ition                         |                 |                |                |  |
| Home Phone Your Cell  |                         |                             |         |   | Spor                                       | use's Cel | II                            |                 |                |                |  |
|   | CHII DREN I             | IVING IN F                  | RESIDE  | ENCE (Use back  | if neces                                   | eary)     |                               |                 |                |                |  |
| Name(s)   | OTHEDITER               | IVIII G III I               | ILOIDE  | COSE DACK   | 1  | Gender    |                               | Da              | te of Birth    | Age            |  |
|   |                         |                             |         |   | ☐ Male                                     | ☐ Fer     | male                          |                 |                |                |  |
|   |                         |                             |         |   | ☐ Male                                     | □ Fer     | male                          |                 |                |                |  |
|   |                         |                             |         |   | ☐ Male                                     | □ Fer     | male                          |                 |                |                |  |
|   |                         |                             |         |   | ☐ Male                                     | □ Fer     | male                          |                 |                |                |  |
|   | GE                      | T CONNEC                    | CTED A  | AT JOY OF FAI   | TH   |           |                               |                 |                |                |  |
| Use numbers 1-3 to indic  | cate your first through | third prefer                | rences  | for volunteer se  | rvice. ("ľ                                 | M" for m  | nale. "                       | F" for 1        | female.)       |                |  |
| M F   | M F                     | М                           | F       |   | MF   |           |                               |                 | M F            | :              |  |
| ☐ Usher   | ☐ ☐ Children's          |                             | ☐ Audio | o/Visual  | ☐ ☐ Altar Call                             |           |                               | □ □ Prayer      |                |                |  |
| □ □ Greeter   | □ □ Praise Team / 0     | Choir 🖵                     | ☐ Servi | ce Setup  | 0 0 F                                      | aith Foo  | d Sho                         | p Book          | store          |                |  |
| □ □ Welcome / Hospitality   | ☐ ☐ Musician            | □ □ Musician □ □ Resource 0 |         |   | ☐ ☐ Office: Circle days available M T W Th |           |                               |                 |                |                |  |
|   |                         | CHF                         | RISTIAI | N DATA  |  |           |                               |                 |                |                |  |
|   | Yourself                |                             |         |   |  | Spou      | ıse                           |                 |                |                |  |
| Have you been born again?   |                         |                             | I .     | Have you been born again?   |  |           |                               |                 |                |                |  |
| ☐ Yes ☐ No If yes, date:  List your past area(s) of experience in church work:    |                         |                             |         | ☐ Yes ☐ No If yes, date:  List your past area(s) of experience in church work:    |  |           |                               |                 |                |                |  |
|   |                         |                             |         |   |  |           |                               |                 |                |                |  |
|   |                         |                             |         |   |  |           |                               |                 |                |                |  |
| Of what church were you most recently a member? (Please indicate city and state.) |                         |                             | I .     | Of what church were you most recently a member? (Please indicate city and state.) |  |           |                               |                 |                |                |  |
|   |                         |                             |         |   |  |           |                               |                 |                |                |  |
| Pastor  |                         |                             |         | astor   |  |           |                               |                 |                |                |  |
| Are you currently involved in any ministry other than JOY OF FAITH                |                         |                             |         | re you currently inv  | volved in a                                | any minis | stry oth                      | ner thar        | n JOY OF       | FAITH          |  |
| Christian Center? ☐ Yes ☐ No If yes, please explain on back.                      |                         |                             |         | Christian Center?   |  |           |                               |                 |                |                |  |
| Signature   |                         |                             |         |   |  |           | Da                            | ate             |                |                |  |
|   |                         |                             |         |   |  |           |                               |                 |                |                |  |
| OFFICE USE: Data Entered  | Badge/Shirt             | : Issued                    |         | 90-day Evaluation   | Complete                                   | ed        |                               |                 | HELPS /        | APPLICATION 14 |  |

## Joy of Faith Christian Center MINISTRY DESCRIPTIONS

We encourage you to become active in the ministry. Involvement will facilitate spiritual and natural growth and maturity. Below is a list of various Ministries of Helps available to you at Joy of Faith Christian Center. The list is given to help you select the ministry that corresponds best to your interest and/or talents.

Please indicate three areas of ministry on this application. Rank each in order of personal desire, with '1' indicating the first choice. We will attempt to place you in your number one choice. However, we may need you to minister in the area of your second or third choice if there is not an opening in the ministry you desire most. Your willingness to serve and flexibility in choice is greatly appreciated. You are helping your church grow by faithfully serving where needed.

| ALTAR CALL Minister to those seeking salvation, rededication and baptism in the Holy Spirit.  | Additional information or explanation from front: |
|---|---|
| AUDIO/VISUAL Technical operation of audio and visual equipment. Technical operation of audio duplication equipment. Duplication & packaging of ministry materials. (Prior experience not required.) |   |
| CHILDREN'S Minister to children 6 months through 8th grade.   |   |
| <b>FAITH FOOD SHOP</b> Serve customers with a positive, cheerful attitude. Stock and sell product. Inventory stock. POS system or customers service experience preferred.                           |   |
| <b>GREETER</b> Welcome everyone to Joy of Faith with a warm and friendly, smile or handshake.   |   |
| MUSIC Accompany music leader as he/she leads the praise, worship and exhortation services. Musicians and singers may respond.   |   |
| <b>OFFICE</b> Assist in the Church Office with general office duties during the week.   |   |
| PRAYER  Join with a small group of believers before service to pray for the service, the Pastor, attendees, special needs of the ministry, government leaders etc                                   |   |
| RESOURCE CENTER  Distribute and receive supplies and materials for various ministry departments. Assist Pastor with various clerical responsibilities.  |   |
| <b>SETUP</b> Place signs and equipment before services, and remove them after services.   |   |
| <b>USHER</b> Assist in seating of parishioners. Assist with serving communion and receiving offerings.  |   |
| WELCOME / HOSPITALITY  Maintain welcome tables, Prepare sanctuary for services, Prepare   |   |

communion.