

Growing Oaks Community Church Children's Ministry

Volunteer Information

Legal Name *

First Name Last Name

Date of Birth *

Month Day Year

Phone Number *

E-mail (preferably Gmail due to Google Doc sharing) *

example@example.com

Address *

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code

Place of Employment

Marital Status

Spouse's Name

Serving Together?

Service You Would Like to Volunteer: *

Sunday, 9:30 am

Sunday, 11:00 am

Wednesday, 6:30 pm

How Often Would You Like To Serve *

Every Week

Once a Month

Twice a Month

I Would Like To Serve in the Following Areas (Check All That Apply) *

Nursery (Infants to age 3)

Preschool+ (Ages 4 to 1st grade)

Elementary (2nd - 5th Grade)

Check-In Operator

Security

Office Volunteer (lesson prep during the week)

Sunday Morning Set Up

Sunday Morning Tear Down

Briefly Describe Your Relationship With Jesus Christ

How long have you attended GOCC?

List Any Training, Education or Spiritual Gifts That Have Shaped You To Serve In The Church (for future training purposes):

List Any GOCC Ministries In Which You Are Involved:

Have You Ever Been Accused, Charged With, or Alleged to Have Committed Any Act of Neglect, Abuse, or Molestation Against A Minor? If Yes, Explain in Detail, Providing Date and Place of Incident: