

The King's Way Volunteer Application



Ministry

Full Name _____

First: _____

Middle: _____

Last: _____

Address _____

City _____

State _____

Zip _____

Email _____

Phone Cell (_____) _____

Home (_____) _____

Celebrate:

In order to better encourage and show appreciation to you and your important life events, we want to celebrate with you!

Birthday _____/_____/_____

Spouse _____

First: _____

Last: _____

Anniversary _____/_____/_____

Water Baptized? _____

Y N

Date _____/_____/_____

Holy Spirit Baptized? _____

Y N

Date _____/_____/_____

King's Way Membership _____

Y N

Date _____/_____/_____

Talent / Skills:

What training or experience do you have that you are willing to share? _____

Have you considered serving in other areas of ministry? What areas interest you?

Background:

Visible volunteers are often assumed to be Christian disciples and trustworthy by other attendees. We want to be wise in our verbal and non-verbal communication. Therefore, we will do background checks for all who volunteer.

Please read and sign The King's Way Background Check Release Authorization.

