

# WORSHIP TEAM MEMBER APPLICATION



Please fill out the following application and return it to your Pastor/Leader/Overseer.

## 1 PERSONAL INFORMATION

- ☐ NAME:
- ☐ CELL PHONE:
- ☐ EMAIL:
- ☐ ADDRESS
- ☐ OCCUPATION:
- ☐ FOR STUDENTS:
  - ☐ SCHOOL:
  - ☐ GRADE LEVEL/MAJOR:

## 2 SPIRITUAL HISTORY

- ☐ HOW LONG HAVE YOU ATTENDED THIS CHURCH?
- ☐ ARE YOU A CHRISTIAN? IF SO, DESCRIBE HOW YOU BECAME A CHRISTIAN.
- ☐ HAVE YOU TAKEN FOUNDATIONS? IF SO, WITH WHOM?
- ☐ WHY DO YOU WANT TO SERVE ON A WORSHIP TEAM?

## 3 MUSICAL/TECHNICAL ABILITY

- ☐ HAVE YOU SERVED ON A WORSHIP TEAM BEFORE? IF SO, WHEN AND IN WHAT CHURCH?
- ☐ WHAT IS YOUR PRIMARY INSTRUMENT (CAN BE VOICE OR SOUND)? DO YOU HAVE ANY SECONDARY INSTRUMENTS?
- ☐ WHAT IS YOUR GREATEST STRENGTH IN YOUR GIFTING?
- ☐ WHAT IS YOUR GREATEST WEAKNESS IN YOUR GIFTING?

## 4 AVAILABILITY

- ☐ AT WHAT CAMPUS(S) ARE YOU INTERESTED IN SERVING?
- ☐ WOULD YOU BE INTERESTED IN SERVING AT A SAT/SUN EVENING SERVICE?
- ☐ ARE YOU ABLE TO PARTICIPATE IN A REHEARSAL AND SERVE IN A WEEKEND SERVICE(S) AT LEAST TWICE A MONTH?