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| Volunteer Application |  |
| God’s Love Ministries Church, *Pastor April Standfield* |  |

## Contact Information

|  |  |
| --- | --- |
| Name: |  |
| Street Address: |  |
| City ST ZIP Code: |  |
| Home Phone: |  |
| Work Phone: |  |
| E-Mail Address: |  |

## Availability

### During which hours are you available for volunteer assignments?

|  |  |
| --- | --- |
| Sunday mornings | Saturday mornings |
| Sunday afternoons |  Saturday afternoons |
| Wednesday evenings | Friday evenings |

## Interests

### Tell us in which areas you are interested in volunteering:

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| --- |
| Minister’s Support Team |
| Choir (adult or children’s choir) |
| Children’s Church |
| Food Service |
| Donations/Clothing |
| Answering Phone-Lines |
| Baptismal Support |
| Volunteer in other areas |

## Special Skills or Qualifications

### Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other Ministry and Church-related activities, or work performed.

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## Previous Volunteer Experience

### Summarize your previous volunteer experience.

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## Person to Notify in Case of Emergency

|  |  |
| --- | --- |
| Name: |  |
| Street Address: |  |
| City ST ZIP Code: |  |
| Home Phone: |  |
| Work Phone: |  |
| E-Mail Address: |  |

## Agreement and Signature

### By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal, and or criminal liability.

|  |  |
| --- | --- |
| Name (printed): |  |
| Signature: |  |
| Date: |  |

## Our Policy

### It is the policy of this organization to provide equal volunteer opportunities without regard to race, color, religion, national origin, or gender.

**Disclaimer**: You agree that *God’s Love Ministries, and Pastor April Standfield, our Deacons, Minister’s and support staff* is not liable for any potential or actual personal, physical, or mental injury that may be caused to you in any way, at any time, and you agree to hold harmless God’s Love Ministries Church and all staff from any such claims. You agree that God’s Love Ministries is a sincere, dedicated Ministry, and we would cause no one harm. You also agree to support our mission, which is to uphold the cause and commission of Jesus Christ, in accordance with Biblical standards. You agree to never harm or cause any harm to any of our members, (and especially do not harm any of our children). You agree to be watchful, and diligent in the care of the Church and in the care of the Church children. You agree to never release any children to any strangers, and to always check Identification (must be State and gov’t issued only) of any adults who may be in the Church facility, for which you are un-familiar. You, as a volunteer and staff worker do understand, that you are also signing up to help us in the protection of our Ministry, (which you are a member of), and it is all our responsibility to be watchful, and concerned about our children. By signing, you agree that you are at least 18 years or older, have no criminal record that would prevent you from safely caring for children, have no mental illness(es) that would endanger the children, and are not a criminal, or a child pedophile, and have never been charged with or listed on any child sex-offender registries. By signing this, you also agree that you are not under any distress and are not being pressured to volunteer or to work for this Ministry in any way.

**Signature of Volunteer/Worker**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Thank you for completing this application form and for your interest in volunteering with us.