



Volunteer Application Form

FOR OFFICE USE ONLY

Date Received _____

Check _____

1st Contact _____

2nd Contact _____

Interview _____

Mark Areas of Interest:

- | | | | |
|--|--|--|---|
| ☐ Altar Care Team | ☐ Communion Helpers | ☐ Lighting | ☐ Traffic Team |
| ☐ Audio/Sound | ☐ Connection Team (Greeter) | ☐ Nursing Home Ministry | ☐ Ushers |
| ☐ Camera Operator | ☐ Funeral Meal Workers | ☐ ProPresenter | ☐ We-Care Center |
| ☐ Camera Shader | ☐ Interpreters, Spanish | ☐ Rhema Book & Gift Store | ☐ WPC/Rhema Connection |
| | ☐ LED Wall | ☐ Shuttle Drivers | Call Center |

Rhema Bible Church membership is required in some of these areas.

Separate applications required for: Music Department Rhema Regals Student Ministries

Name (Last) (First) (Middle)

☐ Male ☐ Female Marital Status: ☐ Single ☐ Married Date of Birth (mm/dd/yy)

Spouse's Name

Address City State ZIP

Telephone Numbers Home () Cell () Email Address

Best Time to Contact You Preferred Method of Contact ☐ Call ☐ Text ☐ Email

Date of Salvation Date of Holy Spirit Baptism Member of Rhema Bible Church ☐ Yes ☐ No How long have you attended RBC?

Previous Church Attended City State Pastor's Name

Current RBTC Student ☐ Graduate ☐ Year Graduated _____

(Being a past or present student is NOT a requirement to volunteer.)

Are you currently involved in other volunteer positions at Rhema Bible Church? ☐ Yes ☐ No

If yes, please list:

Have you previously been involved in volunteer positions at Rhema Bible Church? ☐ Yes ☐ No

If yes, please list:

Are you currently involved in any other ministry other than Rhema Bible Church? ☐ Yes ☐ No

If yes, please list:

Have you ever been accused of, charged with, and/or convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor? Have you been accused of and/or investigated for any other sexually related crimes? ☐ Yes ☐ No

Is there any circumstance or pattern in your life, past or present, which would compromise the integrity of Rhema Bible Church? ☐ Yes ☐ No

List any qualifications or skills you have in the area(s) indicated above.

Mark the times you are available to volunteer: **Sunday** ☐ AM ☐ PM **Wednesday** ☐ PM **Saturday** ☐ AM ☐ PM

☐ Other _____

Applicant Signature of Compliance and Approval: The information contained in this application is accurate to the best of my knowledge. Should my application be accepted, I agree to submit myself to the volunteer expectations communicated to me. I also understand that I represent Rhema Bible Church and will refrain from any conduct that could reflect negatively on the ministry.

Applicant Signature: _____ Date: _____

RBC 12.25-09/26

FOR OFFICE USE ONLY

Contact Attempts 1st _____ 2nd _____ 3rd _____

Department(s) _____

Date Sent _____

Assigned to serve? ☐ Yes ☐ No Assigned Area _____

Schedule _____ Start Date _____ End Date _____

Assigned to serve? ☐ Yes ☐ No Assigned Area _____

Schedule _____ Start Date _____ End Date _____

Comments
