

32068 King Road,
Abbotsford, BC
V2T 5Z5
604-864-0030
www.kingroad.ca



Adult Application Form for Children's Ministry

In our desire to reduce the risk of abuse within our church ministries, we believe this information is necessary to protect our children and to protect our volunteers. Thank you in advance for your understanding.

PERSONAL INFORMATION

Full Name: _____ Male Female
Address: _____ Date of Birth: _____
City: _____ Province: _____ Postal Code: _____
Phone (Home): _____ Phone (cell) _____
Email _____
Marital Status: _____ Spouse's Name(if applicable): _____

SPIRITUAL HISTORY

When did you accept Christ as your Saviour? _____

Have you been baptized on the confession of your faith? Yes No

Do you attend King Road MB Church? Yes No

If yes, are you a member? Yes No

If no, do you attend elsewhere? _____

Do you regularly attend 2 or more services a month? Yes No

In a brief paragraph, please describe what your faith means to you.

32068 King Road,
Abbotsford, BC
V2T 5Z5
604-864-0030
www.kingroad.ca



MINISTRY INFORMATION

In which area(s) of children's ministry are you interested? (pls circle)

Kings Kids Teacher / Kings Kids Small Group Leader / Kings Kids Preschool /
Toddler Room / Midweek Clubs / Wee College / VBS

Describe why you would like to be part of our children's ministry team.

What strengths or assets would you bring to our children's ministry program?

How do you hope to benefit? _____

List any past experiences in serving in Children's Ministry.

Have you taken any courses or received any training that would equip you for
Children's ministry? _____

Do you see yourself as a team player? Yes No

How? _____

32068 King Road,
Abbotsford, BC
V2T 5Z5
604-864-0030
www.kingroad.ca



REFERENCES

(One reference should be a family member and one must be from within our church)

1. Name of Reference _____

Email Address: _____

Phone Number: _____

Nature of relationship: _____

2. Name of Reference _____

Email Address: _____

Phone Number: _____

Nature of relationship: _____

3. Name of Reference _____

Email Address: _____

Phone Number: _____

Nature of relationship: _____

32068 King Road,
Abbotsford, BC
V2T 5Z5
604-864-0030
www.kingroad.ca



RELEASE OF INFORMATION AND DECLARATION OF INTENT

From time to time, pictures may be taken of ministry activities for a pictorial record and may be used as promotional material.

I hereby give King Road MB Church permission to contact persons named as references listed in this application to ascertain my suitability for volunteer ministry. I release all such references from liability for any damage that may result from furnishing such evaluations to you.

I also consent to provide a criminal reference check to King Road MB Church for purposes of my protection against any false allegations and for the protection of those I serve. I consent to such an investigation with the understanding that the results will be kept in extreme confidence. I agree to adhere to the protection guidelines as adopted by this church.

I understand that King Road MB Church is responsible for the welfare of any person or persons entrusted to my care, and thus I will cooperate fully with the staff in the fulfillment of my duties and will keep all information I encounter, in my role as a volunteer, confidential.

If at any time I find that for any reason I am unable to support the policies, procedures or doctrine of King Road MB Church, I will gracefully and quietly resign my volunteer position. If my supervisors find that I am in conflict with any of the policies, procedures or doctrines and we are not able to resolve the issue, I will gracefully and quietly agree to resign my volunteer position.

I hereby acknowledge that the information contained in this application for volunteer ministry is correct to the best of my knowledge.

Signature of Applicant _____ Date _____