



# Worship Team Application

Check desired ministry area:  Vocal Team  Worship Band

### Basic Information

Name \_\_\_\_\_  
First MI Last

Address \_\_\_\_\_  
Street Address City State Zip

Phone numbers \_\_\_\_\_  
Home Work Mobile

Best times to reach me at home are \_\_\_\_\_ OK to call you at work?  Yes  No

How long have you attended our church? \_\_\_\_\_ Have you taken Baysics 101? \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_  
name and relationship

### Family Information (optional)

Marital status (circle one):  Single  Married (anniversary date \_\_\_\_\_)  Divorced

If married, spouse's name \_\_\_\_\_

If you have children, their names and ages:

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

### Ministry Experience (if applicable; list most recent first)

Church (name, city, state, and zip)	Dates	Area of service	Contact person	Phone
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____



## Worship Team Application

### Tell Us About Yourself

Have you begun a relationship with Jesus Christ? Can you tell us a little about that?

Describe significant events in your life that have impacted you spiritually.

What are you doing to grow in your faith at this present time (small group, Bible study, etc.)?

What are your expectations of worship team?

In what ways do you feel you are gifted? (Don't be shy!)

Please describe any formal training or practical experience you've had that relates to your area of ministry interest (lessons, choir, ensemble, band, etc.).

What does the phrase "servant-leader" mean to you?



## Worship Team Application

What is your belief concerning the following issues:

- a. The authority of the Bible
  
- b. Use of tobacco, drugs alcoholic beverages
  
- c. Premarital/extramarital sex

What do you feel are areas of weakness for you, and what areas of your Christian walk or ministry skills would you like to develop?

Are you willing to commit to attending:

Weekend celebration services at Bayside on a regular basis?  Yes  No

A mid-week small group?  Yes  No

Will you:

Strive to lead a godly life in accordance with God's Word?  Yes  No

Commit to the spiritual and physical well-being of people who attend Bayside?  Yes  No

Please explain any "no" answers

To completely answer any of the questions above, please attach another page if necessary.





## Worship Team Application

### Background information

Have you, at any time, been involved in or accused, rightly or wrongly, of sexual abuse, maltreatment, or neglect?

yes  no

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Have you ever been accused or convicted of possession / sales of controlled substances or of driving under the influence of alcohol or drugs?

yes  no

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Are you using illegal drugs?

yes  no

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Have you been arrested or convicted for any criminal act more serious than a traffic violation?

yes  no

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Have you ever been involved romantically or sexually with any minor after you became an adult?

yes  no

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Have you ever been a victim of any form of child abuse?

yes  no

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If yes, would you like to speak to a counselor?

yes  no

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Have you ever gone through treatment for alcohol or drug abuse?

yes  no

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Have you ever been asked to step away from ministry for a time?

yes  no

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Is there anything in your past or current life that might be a problem if we found out about it later?

yes  no

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I have read the church's Statement of Faith and Reducing the Risk of Physical and Sexual

Abuse enclosures and agree to be bound by them.  yes  no initial here: \_\_\_\_\_

If the answer to any of the above questions is yes, please attach another page and write a full explanation. These will be discussed confidentially during your interview.