## Gayton Baptist Church QUEST/SPACE Volunteer Form

**Personal Information** NAME\* **ADDRESS** CITY ZIP HOME PHONE MOBILE PHONE E-MAIL OCCUPATION BIRTHDATE **Marital Status:** If married, spouse's name: If you have children, names and ages: \_\_\_\_\_ How long have you attended Gayton? Are you a member of Gayton? YES NO If not, are you walking toward membership? Other churches you have attended regularly in the last 5 years: We take very seriously the process of discerning and empowering leaders for ministry here at Gayton. This form will serve as an instrument for us to get to know you better, and for you to evaluate your own passion and desire to serve in kids' ministry.

Leadership Opportunities*				
1) Please check <i>all</i> areas in which you are interested in				
serving.				
2) Next to each check, please note how many years of				
experience you have in that particular area (if applicable).				
SPACE afterschool				
tutoring				
substitute bus driver				
special interest class				
other :				
QUEST Summer Camp				
group leader				
bus driver				
field trip chaperone				
pool chaperone				
theme activity leader:				
sports				
science				
home grown (gardening, sewing, etc)				
sports				
heroes and fairy tales				
outer space				
safari 				
cooking				
foreign languages/travel				
theater				
other:				

Expectations	Please read the following statements and check all that apply.		
I will be faithful in atten I will be faithful to the re I will serve with exceller	esponsibilities of my ministry. nce. ministry-related meetings.		I will strive to live a life that honors Christ. I will support the church staff. I will be on time when serving. I will follow my ministry description. I will keep healthy communication with leaders. I will give adequate notice if I resign as a volunteer.

Ministry Questionnaire				
Why do you want to serve in the kids' ministry?	;* 			
What are some of your spiritual gifts and passic	ons?			
Briefly describe how you came to know Jesus (	Christ and how you currently keep yourself spiritually fit?			
Are you involved in other ministries at Gayton?	If yes, describe your involvement:			
	II yes, describe your involvement.			
References	Verification and Release*			
References	I recognize that Gayton Baptist Church is relying on the accuracy of the information			
NAME	that I have provided in this Statement. Accordingly, I attest and affirm that the information I have provided is complete and true and correct. I authorize Gayton			
E-MAIL / PHONE	Baptist Church, its agents and representatives, to contact any person or entity listed on this Statement, and I further authorize any such person or entity to provide Gayton Baptist Church with information, opinions, and impression related to my background and qualifications. I understand and acknowledge that Gayton Baptist Church may			
NAME	conduct a criminal background check to determine my suitability as a volunteer in the children's ministry. I hereby authorize Gayton Baptist Church to conduct a criminal			
E-MAIL / PHONE	background check which may include, without limitation, review of sex offender registries, and child abuse and criminal history records.			
Gayton Baptist Church Kids' Ministry	PRINTED NAME			

SIGNATURE

DATE

We may contact you for further information such as a social security number and/or

driver's license number needed for the background check.

Henrico, VA 23233 804-360-2801 kristin@gaytonchurch.org

13501 North Gayton Road

kristin@gaytonchurch.org giles@gaytonchurch.org