



WORSHIP MINISTRY APPLICATION

We're excited that you are interested in becoming a part of our Worship Ministry. Help us to get to know you better by filling out this application and returning it to the Church Office or email: sal@sanctuaryfellowship.org

The Sanctuary Fellowship
PO BOX 722. Bronx, NY 10472

This application is to be completed by anyone interested in the Worship Ministry at The Sanctuary Fellowship. The purpose of this application is to help us learn more about you so that we can provide opportunities for your gifting and talents to be expressed in ministry at TSF.

PERSONAL

Name	(last)	(first)	(middle)	Birth Date	/ /
Address			City	State	Zip
Day Phone			Evening phone	Email	
Marital status			Number of children and ages		
Present employer			Have you completed the TSF Membership Class?		
How long have you attended TSF?			Date of salvation		
How often can you serve? <input type="checkbox"/> Once every week <input type="checkbox"/> Once every other week <input type="checkbox"/> Once a month					

Are there any other areas of ministry at TSF that you are presently involved in? If yes, which one(s)?

AREAS OF INTEREST

<input type="checkbox"/>	Vocalist	What part(s) do you sing?	Can you harmonize?
<input type="checkbox"/>	Musician	What instrument(s) do you play?	Can you play by ear? Can you read music theory?
<input type="checkbox"/>	Sound/Audio	What experience?	

What areas of ministry are you willing to serve in?

CHURCH HISTORY

List any churches you have attended regularly during the past five years:

Church name:

Pastor's Name:

Reason for Leaving:

Church name:

Pastor's Name:

Reason for Leaving:

EXPERIENCE

List all previous **church work** involving music:

Church name:

Dates:

Address:

Type of work performed:

Church name:

Dates:

Address:

Type of work performed:

List all previous **Non-Church work** involving music:

Organization

Dates:

Address:

Type of work performed:

Organization

Dates:

Address:

Type of work performed:

List any gifts, callings, training, education, or other factors that have prepared you for worship ministry:

Briefly share why you would like to be a part of the Worship Team at The Sanctuary Fellowship.

COMMITMENT

*I have read The Sanctuary Fellowship Worship Ministry Handbook and agree to follow its guidelines.
I have read the Honor Code and commit to keep it.
I agree to a six-month probation commitment.
I understand if during or after 6 month probation I have not or can't fulfill my duties I will no longer be part of The Sanctuary Fellowship Worship Ministry.*

Signature

Date

REFERENCES

List two (2) references that you have known for more than a year (other than former employers or relatives):

Name	Phone
Name	Phone

The information contained in this application is correct and complete to the best of my knowledge. I authorize any references or churches listed in this application to give you any information and opinions they may have regarding my character and fitness for work in ministry. I release any individual, church, organization, charity, employer, reference, or any other person or organization from any and all liability for any damage that may result from furnishing such evaluations to you, and I waive any right that I have to inspect the reference provided on my behalf. Should my application be accepted I agree to be bound by the constitution, by-laws, and policies of The Sanctuary Fellowship and to refrain from unscriptural conduct in the performances of my services on behalf of the church.

Signature

Date
