

STUDENT MINISTRIES

Band and/or Vocal Team Application

Name _____

Address _____

Phone number where you can best be reached (_____) _____

E-mail _____

Please complete the following:

1. Are you willing and able to come early on Sundays as requested (7:30 a.m. for rehearsal)
2. On a separate piece of paper, please answer the following questions and turn them in with your application:
 - A. What is your testimony?
 - B. Why do you want to be on the Band and/or Vocal Team?
3. Sit down with a parent and discuss salvation and sanctification in your life. Please have them initial that you have had this conversation. Parent's initials _____
4. Ask your parent to read and sign this form.

Dear parents,

It is important that those students who are leading in worship profess faith in Christ and exhibit Christ-like lives. It is our desire that students who lead worship are living a consistently godly life and keeping a good testimony. Also, we desire that these students honor, respect, and obey their parents in accordance with Scripture. Should this become an issue in the future, or should you feel that they may need to step down from leading worship because of their walk, we encourage you to let us know. Please sign below to verify that the applicant has discussed these qualifications with you and has received your permission to commit to this ministry. Thank you!

Parent's signature _____ Date _____

