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## **MEDIA MINISTRY VOLUNTEER APPLICATION**

Thank you for your interest in the Media Ministry at The Chapel. All applicants must complete every question within this application. These questions help us to determine how to best get you started as well as assist you with proper training, placement, and other organizational items. We do reserve the right to deny applicants based upon certain criteria. Please fill out the application as completely as possible and with as much information as is available. Thank you.

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**CONTACT INFORMATION**

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Date of Birth: \_\_\_\_\_





**TECHNICAL EXPERIENCE**

Media/Technical related education you have attained (on any level):

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Technical-related experience (list any you feel apply):

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**ADDITIONAL SKILLS**

What is your current place of employment? \_\_\_\_\_

Briefly describe your job function:

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Please list any additional experience/skills you have in any area (does not have to be related in any way to the technical arena):

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**ADDITIONAL INFORMATION**

Which Sunday worship service do you regularly attend? \_\_\_\_\_ 9:00 AM

\_\_\_\_\_ 11:00 PM

Do you have any limitations or conditions that may prevent you from performing certain types of activities within the Media Ministry? If so, please describe below:

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**STATEMENT AND SIGNATURE**

By signing below, I state that the information I have given in this application is correct to the best of my knowledge. I understand that staff members of The Chapel will review this application to determine my eligibility for service within the Media Ministry and agree to abide by their decision.

Further, if accepted into service within the Media Ministry, I agree to submit to the authority placed over me by this ministry. I commit to attend required meetings as best I am able and to uphold my time commitment to this ministry. I understand that deviating from these commitments may result in dismissal from ministry service.

Applicant's Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IF UNDER 18, A PARENT/GUARDIAN OF THE MINOR APPLICANT MUST COMPLETE BELOW:**

**I, the parent or guardian of the above applicant, consent to my child's commitment made above. Further, I commit to assist them in upholding this commitment and to encourage them to put priority on their service here in the Media Ministry. I agree to support and uphold decisions by this ministry's leadership on acceptance and, if applicable, placement within the ministry organization.**

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_