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Volunteer Ministry Application

Thank you for your interest and willingness to join the Emmanuel Praise and Worship Centre's Volunteer Ministry. Please complete the following form and return it to Pastor William or Vanessa Dover.

Name:		Email:	
Home Phone:		Cell Phone:	
Address:			
City:		Province:	Postal Code:
Birthday (Month & Day):		Wedding Anniversary:	
Have you accepted Christ as your Personal Saviour?		___ Yes ___ No	
Have you been baptized by immersion? Year _____		___ Yes ___ No	
Some of our volunteer positions require annual criminal reference checks. Have you ever been convicted of a crime other than a minor traffic violation?		___ Yes ___ No	
Volunteer Ministry Teams - please indicate all the service areas of interest to you:			
___ Children's Ministry	___ Women's Ministry	___ Men's Ministry	___ Youth Ministry
___ Worship Team	___ Music Team	___ Usher Team	___ Greeting Team
___ Missions Team	___ Evangelism Team	___ Benevolence Team	___ Hospitality Team
___ Media Team	___ Prayer Team	___ Take Courage Ministry	___ Fellowship Planning
___ Pastoral Care Team	___ Parking Lot Team	___ Custodial Team	___ Follow-up Team
Another ministry you feel led of the Lord to be involved in:			
Signature:		Date:	

For Office Use Only	
Date Received:	Date Reviewed:
Interview Needed: ___ Yes ___ No Application Denied: ___ Yes ___ No	Date Interviewed:
Pastor's Signature:	Date Approved: