CALVARY CHAPEL SANTA FE SPRINGS

CHILDREN'S MINISTRY YOUTH APPLICATION



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REQUIREMENTS:

- Must attend two services per week
- Must be saved for 1 year and have attended CCSFS weekly for at least six months
- Must have approval of parents or guardians

PERSONAL HISTORY						
Name:	E	irthday:	/	/		
Address:						
Email:						
Phone:						
Parent's Name:	P	'arent's Pho	ne Num	ber:		
School you attend:				Curren	t GPA:	
Are you currently passing all your c	lasses?				Yes	No
List any extracurricular activities and	sports in which you are invo	olved:				
Have you ever molested a child?					Yes	No
Have you ever been accused of phy	ysically abusing (bullying) a	minor?			Yes	No
If yes, please explain:						

Personal References:				
Name	F	hone		
SPIRITUAL HISTORY				
Do you believe in God?		Yes	No U	ncertain
Have you come to the place in your spiritual life whyou know for certain that if you died tonight you we		Yes	No U	ncertain
What is the basis for answering the above question	as you did?			
Have you received Jesus as your personal Lord and	d Savior?	Yes	No U	ncertain
How do you know that Jesus Christ is your Savior?				
If you have received Christ as Savior, what change	s took place in your	life when you beco	ame saved?	
Have you been baptized?	Yes	No When?		
How often do you pray?	Never	Occasionally	Often	Daily
How often do you read the Bible?	Never	Occasionally	Often	Daily
How often do you have personal devotions:	Never	Occasionally	Often	Daily

What services are you attending at CCSFS?			
Sunday Morning Wednesday Evening	Other		
Sunday Evening Prayer Meeting			
List any ministries in which you are currently involved:			
Signed:	Date: /	/	
PARENT/GUARDIAN CONSENT AND AGRE	EMENT		
Do you see evidence of the Lord working in your child's life?		Yes	No
Does your child display servanthood in your home?		Yes	No
What do you see as your child's spiritual strength(s)?			
Are there any reasons why your child should not be involved in mi	nistry at this time?	Yes	☐ No
If yes, please explain:		103	
I understand the commitment my child is making to serve in the bo	ody of Christ. I will encour	age my child	in his/
her service to the Lord and also commit with him/her to the response to inform leadership if my a	, ,		
would disqualify him/her from ministry.			
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Parent/Guardian Signiture:	Date: /	/	

^{*}Submit your completed application to the Information Desk. Once the church office receives your application, a pastor or ministry leader will contact you.