



CHRIST COMMUNITY CHURCH

restoring hope. healing lives.

WORSHIP ARTS MINISTRY - MUSICIANS

Name: _____ Today's date: _____

Address: _____ Date of Birth: _____

_____ Gender: Male _____ Female _____

Phone: (home #) _____ (cell #) _____

E-mail: _____ Best way to reach you: _____

Marital Status: Single _____ Engaged _____ Married _____ Widowed _____

Divorced _____

Spouse's Name: _____ Years Married: _____

Children: Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Employed: Full Time/Part Time Position _____ Employer _____

Student: Full Time/Part Time Year _____ School _____

I am applying for:

SINGER Vocal Part: Soprano Alto Tenor Bass

BAND What is your primary instrument? _____ Years of study: _____

Can you: Read Music? _____ Chord Charts? _____ Sing/play by ear? _____

What are two ways you enjoy spending free time (hobbies, interests, etc.):

1. _____
2. _____

Name two of your strengths:

1. _____
2. _____

Name two areas where you need to grow:

1. _____
2. _____

Please briefly explain your salvation experience:

Describe your spiritual growth since that time and what God is currently doing in your life: _____

How long have you attended CCC? _____ Are you a member? _____

Do you currently tithe?

Have you been baptized/filled with the Holy Spirit? _____

If so, please explain when and how: _____

What do you think your spiritual gifts are? (For example, 1 Cor. 12 and Rom. 12): _____

Explain your heart for worship and why you desire to be involved in the Worship Ministry:

What performing or worship experience have you had, if any? _____

Please describe your current involvement in other areas at CCC. (Areas of ministry, service, leadership, etc.):

Is your spouse and/or family supportive of your involvement? _____

Give one reference from past leadership or ministry experience (a leader/pastor you served under):

Name: _____ **Position:** _____ **Phone or email:**

Are you willing and able to commit to:

Sunday rehearsal (8:15am) & service: **Yes** **No**

Wednesday evening rehearsal (6:30 – 8:30 pm) **Yes** **No**

Signed _____ **Date** _____

Please return application to the CCC Welcome Desk (ATTN: Heidi Ryan) or email to hryan@christcc.org