



Ministry Partner Renewal Application

Full Name (F,M,L): _____

Address: _____

City: _____ State _____ Zip _____

Daytime Phone: _____ Alternate Phone: _____

Date of Birth: _____ Sex _____ Race _____ Occupation _____

Email Address: _____

Which area(s) of this ministry are you currently involved? _____

What other areas of this ministry, if any, do you plan to become involved? _____

Are you willing to help with childcare at church events other than Sunday mornings? Yes No

Have you at any time ever:

Been arrested for any reason? Yes No

Been convicted of, or pleaded no contest to any crime? Yes No

Engaged in, or been accused of any child molestation, exploitation or abuse? Yes No

Are you aware of:

Having any traits or tendencies that could pose any threat to children, youth, or others? _____

Any reason why you should not work with children, youth, or others? _____

If the answer to any of these questions is "yes", please explain in detail: _____

I recognize that Tabernacle Community Church is relying on the accuracy of the information I provide on the Ministry Partner Renewal Application form. Accordingly, I attest and affirm that the information is absolutely true and correct. I voluntarily release Tabernacle Community Church and any such person or entity listed on this form from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary. I agree to abide by all policies and procedures of Tabernacle Community Church and to protect the health and safety of the person assigned to my care or supervision at all times.

Signature: _____ Date _____