



CLC Piqua Volunteer Interest Application

Applicant Information

Full Name:				Date:	
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Address:					
	<i>Street Address</i>			<i>Apartment/Unit #</i>	
	<i>City</i>			<i>State</i>	<i>ZIP Code</i>
Home Phone:			E-mail Address:		
Cell Phone:		DOB (MM/DD/YY)	How long have you attended CLC?		
I am interested in: Family Life, Discipleship, or Weekend Impact		Primary interest:		Secondary interest:	
Have you taken the CLC 101 class?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		

Circle at least one ministry you are seriously considering:

Weekend Impact:

Music

Greeter/Usher

Welcome Center

Café

Tech Support

Emergency Response

Family Life:

Discovery Town

Student Ministries

Marriage Mentor

Discipleship:

Small Group Host

Guest Call Team

CLC 101

Care Giving

Next Steps Teacher

Prayer Requests