



## ANTIOCH-LITHONIA MISSIONARY BAPTIST CHURCH

### Nursery Application and Release Form

#### General Information

Last Name:	First Name:	Male/Female	
Date of Birth	City of Birth	County	State
Maiden Name	SS#		
Phone:	Work Phone:	Cell #	Email
Marital Status:		Occupation:	
Spouse' Name:		Children's Name & Ages:	
Current Address:	Street or PO Box		
City	State	Zip Code	
<u>Previous Address:</u>			
City	State	Zip Code	
<u>Church Information:</u>			
Are you a member?			
If at our church less than two years, list previous church affiliations, including length of time at church.			
<u>List all previous church involvement working in children's ministry (identify church and work)</u>			

List any gifts, training and other factors that have prepared you for serving in children's ministry in our church:

**Personal Information**

Why do you feel called to work with children?

What are your biggest concerns or fears about working in this ministry area?

What do you think will be your greatest rewards from working in this ministry?

**BE ASSURED THAT YOUR COMMENTS WILL BE HELD IN STRICT CONFIDENCE.**

**Applicant's Statement**

The information contained in this application is correct to the best of my knowledge.

Yes              No

I have attached a copy of my driver's license to this application.

Yes              No

In connection with my application to serve as a volunteer in the ministries of this church, I authorize this church, their agent, to solicit background information relative to my identity, to any criminal record history, and to my suitability for serving in a position of trust. I understand that this church may conduct inquiries into my background that may include criminal records, personal references and other records and reports pertaining to me.

I authorize without reservation, any person, agency or other entity contacted by this church, their agent, for purposes of obtaining background report information to furnish the above-mentioned information.

I release this church and their respective employees and all persons, agencies and entities providing information or reports about me, from all liability by furnishing any such information or reports.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date