

FRONTLINE COMMUNITY CHURCH

WORSHIP TEAM APPLICATION

616.647.1111 www.frontlinegr.com

General Information

Date _____

Last Name	First Name	Phone Number
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Street Address zip	City	State
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Email Address	Birth Date	Marital Status
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Any other contact information that would be helpful (cell phone number, additional email address, etc.)

Ministry Experience

Have you served on any other worship teams in the last 5 years? _____

Church/Organization Date	Start Date	End
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Position	Reason for Leaving
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Contact Person	Title	Contact Phone Number
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Church/Organization	Start Date	End Date
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Position	Reason for Leaving
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Contact Person	Title	Contact Phone Number
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Personal Information

How long have you attended Frontline Community Church? _____

Give a brief personal testimony of your walk with the Lord.

Give a brief history and current status of your musical skills and involvements.

When was the last time that a worship song really meant something to you in your life?

Describe what your worship time outside of Sunday morning church is like.

Describe the role that worship plays in your life.

Why do you want to be on the worship team?
