



Church of God by Faith, Inc. Volunteer Application Form

Please email completed applications to: info@cogbf.org | Fax: 904.779.5399



Last Name

First Name

Date

Address

City State

Zip Code

Email

Home Phone

Cell Phone

Other Phone

Do you speak any foreign languages? Yes No

If so, which one?

Date of Birth

Age: 12-17 18-25 26-35 36-45 46-55 55+

Parent or guardian name if under age 18

Parent or Guardian signature if under age 18

Telephone

Are you seeking volunteer hours toward community service, junior high or high school graduation? Yes No

Grid of checkboxes for various ministries: Child ID, Children's Church Ministry, Exhibits Attendants, Greeters/Hospitality Ministry, Media Ministry, Medical Emergency Team, Photographers, Prayer & Outreach Ministry, Registration, 2nd Century ByFaith 18-35, Security, Sign Language Ministry, Stage Crew, Store Attendants, Usher Ministry, Videographers, Website Creation, Women's Ministry, Youth Corps, Others

Required reference from your pastor

Pastor's signature required to approve this application

Phone Number

Name of second reference

Relationship to applicant

Phone Number

OFFICE USE ONLY table with fields for Received Date, Date Forwarded to Ministry Director, Email Distribution List Date, Messaging System Date, Reference Check Date

Signature & Comments: