



GILLIAM SPRINGS

BAPTIST CHURCH

VOLUNTEER FORM

Name _____

Address: _____

Phone: _____ Date of Birth: _____

Email: _____

Driver License #: _____ ****Copy of drivers license (Required)**

**By signing below, I understand I may be required to provide photo identification such as my driver's license, military ID, passport, etc., which will be photocopied and placed in my file in order to verify my identification. I also understand and give my consent to a background check if Gilliam Springs Baptist Church deems it necessary.*

Signature

Print Name

Date

Social Security # (optional): _____

If **not** a GSBC church member:

Are you a member of a church? _____ Name of church: _____

Do you attend a church on a regular basis? _____ Who referred you to our ministry? _____

2 References (of your character)

Name _____

Relationship _____ Phone _____

Name _____

Relationship _____ Phone _____

Volunteer Agreement

As a volunteer of this Gilliam Springs Baptist Church ministry, I agree to comply with the given instructions for the ministry. As a representative of Gilliam Springs Baptist Church, I also agree to do nothing that would detract from, or go against the beliefs and theology of Gilliam Springs Baptist Church. In signing this, I understand that if I do, or say, anything that goes against the beliefs and theology of Gilliam Springs Baptist Church while serving in this ministry I can or will be asked to no longer participate with this ministry.

Signature

Print Name

Date