

Annual Renewal Volunteer Application Adult

Please check any Ministries in which you currently serve:

Early Childhood Ministry Children's Ministry Middle School Ministry MOPS
 Child Care Worker High School Ministry Other (Specify) _____

Personal Information:

First Name _____ Middle Initial _____ Last Name _____

Please fill out address information if there is a change:

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Cell Phone Carrier (for texting) _____ Email _____

Since submitting your previous application, have you:

- | | | |
|---|-----|----|
| 1. Used illegal substances or <i>abusively used</i> legal but addictive substances (including alcohol)? | Yes | No |
| 2. Been arrested for any reason? | Yes | No |
| 3. Been convicted of, or pleaded no contest to any crime? | Yes | No |
| 4. Engaged in or been accused of any act of child molestation, exploitation or abuse? | Yes | No |
| 5. Had a change in your health that may affect your ministry with children or students? | Yes | No |

If you answered "yes" to any of the above, please explain (use the back of this form if necessary).

Authorizations:

BY COMPLETING AND SUBMITTING THIS FORM, I AGREE TO THE FOLLOWING:

1. I represent that I am age 18 or older.
2. I understand that CCOB intends to take reasonable precautions to assure the safety and security of volunteers serving within CCOB ministries, but acknowledge that, even with such precautions, there is a possibility that I might suffer injury or death or loss of or damage to my property.
3. In consideration of CCOB's allowing me to participate , I release CCOB and its members, officers, directors, employees and agents (collectively, the "Released Parties") from any liability for injury to or death resulting from my participation in any Event or for damage to or loss of my personal property occurring in connection with volunteer service.
4. I further agree to indemnify and hold harmless the Released Parties against any liability or expense that may arise out of my participation as a volunteer.
5. If using my automobile to transport other participants in an Event, I certify that I have a valid driver's license and that I and my vehicle are insured against liability for bodily injury and property damage.
6. I also agree that any photographs, video recordings and voice recordings of me taken in connection with participation in **any** Christ Church event will be the property of Christ Church of Oak Brook and may be used by Christ Church of Oak Brook for any promotional and informational purposes it deems appropriate. Possible uses include but are not limited to exhibits, displays, DVDs and CDs, printed collateral, Web pages and external periodicals.
7. This release will be valid for one year from authorized signature's date of this document.

Signature: _____ Date: _____

Your printed name: _____

Please return this application in a sealed envelope to the Pastor/Director of the area you wish to volunteer or mail directly to the church, attention: Executive Pastor of Ministry.

FOR OFFICE USE ONLY

Ministry Pastor/Director _____ Date _____

Executive Pastor of Ministry _____ Date _____