



## Children's Ministry Volunteer Application

This application is to be completed by all Children's Ministry volunteers. It is to be used to help the church provide a safe and secure environment for children who participate in our programs and use our facilities. All information will be kept confidential and stored in a secured location. Thank you for your time and interest in working with PCC KIDS!

### Personal Information

Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Today's Date \_\_\_\_\_  
First Last

Email address \_\_\_\_\_ Cell phone \_\_\_\_\_ Text ok? \_\_\_ yes \_\_\_ no

Address \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Street City State Zip mm/dd/yyyy

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Spouse's name (if applicable) \_\_\_\_\_ Phone \_\_\_\_\_  
First Last

No. of children \_\_\_\_\_ Ages \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_  
First Last

### Availability

Check all that apply.

Weekends: Sunday Services \_\_\_ 8:30 \_\_\_ 10:15

\_\_\_ Classroom Lead \_\_\_ Classroom Co-Lead \_\_\_ Experience Team (Kids Kiosk) \_\_\_ Creative Team (Special Events)

Age/Grade Preferences: \_\_\_ Birth - 1 year \_\_\_ 2 - 4 years old \_\_\_ 5 years - Kindergarten

\_\_\_ 1st grade \_\_\_ 2nd - 3rd grade \_\_\_ 4th - 5th grade

Weekdays: \_\_\_ Wednesday PM Heroes, Inc. \_\_\_ Tuesday AM Moppets

\_\_\_ Heroes, Inc. Experience Team \_\_\_ Mops Experience Team

### Spiritual History

Have you accepted Jesus as your Lord and Savior? \_\_\_ yes \_\_\_ no

How are you growing in your relationship with Christ? \_\_\_\_\_

### Church History

How long have you been attending PCC? \_\_\_\_\_

Have you attended a Discovery Class? \_\_\_yes \_\_\_no Are you a member? \_\_\_yes \_\_\_no

What other ministries have you been involved with at PCC or your previous church?

\_\_\_ Now & Forever \_\_\_ The Verge \_\_\_ Community Group \_\_\_ The Gathering \_\_\_ TRIIIADs \_\_\_ Other

If other, please list: \_\_\_\_\_

List any special talents, background knowledge, spiritual gifts and/or training. How do you envision these being utilized in ministry?

---

---

---

Are you currently CPR Certified? \_\_\_yes \_\_\_no      Are you currently First Aid Certified? \_\_\_yes \_\_\_no

### ***Personal References/Information***

Must be at least 18 years old and not related to you.

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_
2. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

It is our desire that the lives of our volunteers are a model to the kids in our ministry. Please answer the following questions that may negatively impact your involvement with children. Answering "yes" to any of these questions may not necessarily preclude your involvement in Children's Ministry.

Have you ever been hospitalized or treated for alcohol or substance abuse? \_\_\_ yes \_\_\_ no

Have you ever been convicted of, pled guilty or pled no contest to a crime other than a minor traffic violation, or are you now under charges for any criminal offense? \_\_\_ yes \_\_\_ no

Legal stipulations require the church to run a background check, applicants over age 18. Please fill out completely and sign the enclosed Authorization For Release of Background Information. California AB 655 requires that a copy of the report be given to applicant if requested. Please indicate your choice by checking one of the following boxes: \_\_\_ yes \_\_\_ no

### ***Volunteer Agreement***

I understand that being involved in Children's Ministry at Pacific Coast Church, I am making a commitment to the following responsibilities:

1. I will maintain my personal relationship with Christ through Bible reading, fellowship with other Christians, and regularly attend worship services.
2. I will pray regularly for the ministry and for the children for whom I am responsible.
3. I will cooperate in a spirit of unity and loving support with my Children's Ministry Director, support staff, and volunteers.
4. I will arrive at my place in ministry on time and be well-prepared, striving to present God's Word clearly.
5. I will provide a safe and fun environment for the children to whom I am responsible.
6. I will make every effort to attend all volunteer trainings and enrichment classes offered.

The information contained in this application is correct to the best of my knowledge and I will do my best to fulfill the above expectations. I authorize any references, churches, or instructions listed on this application, including law enforcement agencies, to give any information regarding my character, background, and fitness to serve in Children's Ministry. I agree to follow the policies of Pacific Coast Church and to refrain from unbiblical conduct in the performance of my services on behalf of the church.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Parent Name \_\_\_\_\_  
(for applicants under age 18) (printed)

Parent Email \_\_\_\_\_ Parent Contact Number \_\_\_\_\_

Please return this form to one of the locations below:

**Church Campus Kids Kiosk**  
2651 Calle Frontera San Clemente 92673

**Church Office**  
1011 Calle Sombra Suite 220 San Clemente 92673  
(949) 940-2600