

NAME: _____ D.O.B.: ____/____/____

ADDRESS: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

Do you currently hold a Blue Card? Yes / No.

Blue Card Reference Number: _____ Blue Card Expiry Date: _____

If no, have you applied for a Blue Card? Yes / No Date: _____

Do you have a current First Aid Certificate? Yes / No Expiry Date: _____

If you have any medical conditions or any other relevant information that would impact your involvement in Children's Ministry please inform us below:

What do you believe are your gifts, talents and abilities that may be especially suited to Children's Ministry? Please also list any related qualifications or training.

Emergency contact details	Contact 1	Contact 2
Contact Name		
Relationship		
Mobile Phone Number		

The information contained in this application is correct to the best of my knowledge.

Jesus said, "Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these" (Matthew 19:14). I agree to minister to the children/young people in my care in a Godly and Biblical manner in accordance with the Church's Code of Conduct and to teach them material in agreement with the doctrinal beliefs and policies established by the leadership of Beenleigh Baptist Church. I understand that if the church leadership at any time deem my conduct inappropriate in children's/young people's ministry I could be asked to step down from my role immediately.

Signature: _____ Date: _____