



## Volunteer Information Sheet

(All information is kept strictly confidential)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Spiritual Gift (if known) \_\_\_\_\_

Home Church \_\_\_\_\_

Other Areas of Ministry \_\_\_\_\_

Area(s) of Personal Recovery \_\_\_\_\_

Completed 12 Steps:  Yes  No      Rehab/Treatment:  Yes  No

12 Step/Recovery Experience:  Yes  No      Recovery Date: \_\_\_\_\_

### Celebrate Recovery Service Opportunities

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Sponsor              | <input type="checkbox"/> Worship Leader           | <input type="checkbox"/> PowerPoint           |
| <input type="checkbox"/> Vocalist             | <input type="checkbox"/> Dinner Prep              | <input type="checkbox"/> Dinner Clean Up      |
| <input type="checkbox"/> Band                 | <input type="checkbox"/> Greeter                  | <input type="checkbox"/> Prayer Ministry      |
| <input type="checkbox"/> Welcome Table        | <input type="checkbox"/> Small Group Leader       | <input type="checkbox"/> 12 Step Group Leader |
| <input type="checkbox"/> Solid Rock Café Prep | <input type="checkbox"/> Solid Rock Café Clean Up |   |

Why would you like to serve? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



FIRST COLONY Church of Christ  
*An independent, non-denominational church*