

## Life Team Application Form

Name (Last)	(First)
Street Address	<del></del>
	State Zip
Home Phone	
Work Phone	
Mobile Phone	
Email	
Facebook	Twitter.com@
Preferred method of contact	
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I would like more information about so	erving on ONE (1) of the following Life Teams:
City Kids (0-5 <sup>th</sup> Grade)	Hospitality
Student Ministries (6th-12 <sup>th</sup> )	IT/Tech Team
Student Ministries (6th-12 <sup>th</sup> )  City Worship	IT/Tech Team Parking Lot
, , <u> </u>	
City Worship	Parking Lot
City Worship Audio/Video	Parking Lot Usher/Greeter

<sup>&</sup>quot;...an authentic, Christ-centered biblical community of faith with local impact and global influence."