

Complete this interactive form then save and email it to the office at fofmbc@bellsoth.net. Or complete form, print and bring it to the office.



We want to know where you would like to serve.
Getting to know you

Thank you for your interest in serving in a ministry with Fountain of Faith. We are entering a new year of ministry and we have many opportunities for people to serve. Please the complete this survey and return to the church office. We want you to get "plugged in to ministry."

Name: _____

Address: _____

City, State: _____

Email: _____ Phone: _____

Age: 18-23 24-35 36-45 46-55 56-65 65+

Status: Single Single Parent Married Widowed Divorced

DOB: Month/Day _____ Wedding Anniversary Date (if applicable): _____

How many years have you attended Fountain of Faith? _____ Are you a member? No Yes

Are you part of a ministry? No Yes if Yes, Which ministry? _____

Are you on Facebook? No Yes if yes, do you follow Fountain of Faith? No Yes

Do you have children under 17? No Yes if, yes children's ages: _____

Use the back for additional space

WHERE WOULD YOU LIKE TO SERVE? (Choose all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Children/Nursery | <input type="checkbox"/> Anywhere, I can help | <input type="checkbox"/> Communication/Organization |
| <input type="checkbox"/> Outreach | <input type="checkbox"/> Special Event Planning/Setup | <input type="checkbox"/> Prayer Team |
| <input type="checkbox"/> Teaching/Bible Studies | <input type="checkbox"/> Mentoring Program/Youth Ministry | <input type="checkbox"/> Summer Day Camp |
| <input type="checkbox"/> Afterschool Program | <input type="checkbox"/> Health and Wellness | <input type="checkbox"/> Financial Planning |

WHAT DAYS/TIMES ARE YOU TYPICALLY AVAILABLE TO SERVE? (Choose all that apply)

- | | | |
|---|---|--|
| Sunday <input type="checkbox"/> AM <input type="checkbox"/> PM | Wednesday <input type="checkbox"/> AM <input type="checkbox"/> PM | Saturday <input type="checkbox"/> AM <input type="checkbox"/> PM |
| Monday <input type="checkbox"/> AM <input type="checkbox"/> PM | Thursday <input type="checkbox"/> AM <input type="checkbox"/> PM | |
| Tuesday <input type="checkbox"/> AM <input type="checkbox"/> PM | Friday <input type="checkbox"/> AM <input type="checkbox"/> PM | |

I HAVE THE FOLLOWING SKILLS TO OFFER TO FOUNTAIN OF FAITH: (Choose all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Another language if so, what: _____ | <input type="checkbox"/> Videography |
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Crafty/Creative DIY |
| <input type="checkbox"/> Decorating | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Food/Cooking | <input type="checkbox"/> Mentoring/Discipleship |
| <input type="checkbox"/> Prayer | <input type="checkbox"/> Teaching/Table Leader |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Bible Study |
| <input type="checkbox"/> Music/Singing Talent | <input type="checkbox"/> Other: _____ |

~~Back Page~~ **Additional Information you would like to share with us?**