Name:			
Phone:			
Email:			
What instrument Instrument:	do you play? (circle	e option)	
Keys/Piano	Electric Guitar	Acoustic Guitar	Bass Guitar
Drums	Strings	Other? (If other,	list below)
Vocal: Sopra	part? (circle option) ino Alto Teno monize? Yes No would you be willin wn? Yes No	r Bass	er from me or on
Can you read cho	rd charts?		
How long have yo	u been playing you	ır instrument?	
How would you lil	ke to grow as a bet	ter musician?	

We rehearse for our Sunday morning services Thursday nights from 7-8:30p and 7-8am on Sunday morning. Are you able to make these rehearsals?
How did you come to know Jesus as your Lord and Savior? You can attach a document if the space below is not enough.
Are you a member at Crossview? If not, how long have you been attending Crossview?
Why do you want to join the worship team?
Thank you for taking the time to fill out this application. If you have any questions, you can email Pastor Matt at mcalio@crossviewefca.com .