Name:			
Phone:			
Email:			
What instrumer Instrumen	nt do you play? (circ t:	cle option)	
Keys/Piano	o Electric Guitar	Acoustic Guitar	Bass Guitar
Drums	Strings	Other? (If other,	list below)
Vocal: Sop Can you ha	t part? (circle option rano Alto Ten armonize? Yes No t, would you be will own? Yes No	or Bass  o  ling to learn, whethe	er from me or on
Can you read ch	ord charts?		
How long have y	you been playing yo	our instrument?	
How would you	like to grow as a be	etter musician?	

We rehearse for our Sunday morning services Thursday nights from 7-8:30p and 7:30-8:30am 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 <a href="mailto:mcalio@crossviewefca.com">mcalio@crossviewefca.com</a> .