



Journey ACCESS Volunteer Team

Date: _____

NAME: _____

ADDRESS: _____

CONTACT PHONE # (s) _____

E MAIL ADDRESS: _____

When did you decide to do life with Jesus?

Do you attend Journey Community Church as your home church? _____

How long have you been attending JCC? _____

List any ministries/groups that you are currently participating in/ serving in?

Have you attended First Step and/or Our Journey?

In what area/team of our Access Volunteer Team would you like to serve?

Prayer Teams

Healing Prayer _____ Inner Healing Prayer _____ Encouraging God Words _____

Volunteer Teams

Spiritual Practices _____ Worship and Creative Arts _____ Set-up +Logistics _____

Please fill out this application and return it to Kristy Dees, scan to kristy@journeycom.org, or turn in the our Church Offices during office hours. T-F, 9am-5 pm

I have read and agree to follow [Journey's Prayer Culture Guidelines](#) (linked)

Sign here _____