

NAME: _____

EMAIL: _____

PHONE: (HOME) _____ (W/CELL): _____

PLEASE MARK YOUR INTERESTS AND/OR TALENT WITH AN 'X':

<input type="checkbox"/> Admin/organization/office work	<input type="checkbox"/> Arts (specify):
<input type="checkbox"/> Phones, filing, copy, etc.	<input type="checkbox"/> Crafts (specify):
<input type="checkbox"/> Operations/facility services	<input type="checkbox"/> Calligraphy
<input type="checkbox"/> Carpentry/building/repair work	<input type="checkbox"/> Sending cards/making calls
<input type="checkbox"/> Communications/technology	<input type="checkbox"/> Drama/Theater
<input type="checkbox"/> Audio/visual presentations	<input type="checkbox"/> Puppetry
<input type="checkbox"/> Marketing/PR/Publicity	<input type="checkbox"/> Teaching Age:
<input type="checkbox"/> Computer work/data management	<input type="checkbox"/> Drawing/Painting (set design)
<input type="checkbox"/> Graphic arts/writing	<input type="checkbox"/> Sewing/quilting/knitting/crochet
<input type="checkbox"/> Photography/videography	<input type="checkbox"/> Banner Making
<input type="checkbox"/> Budgeting/financial/accounting	<input type="checkbox"/> Sanctuary decorations, paraments, flowers, banners
<input type="checkbox"/> Baking cookies/providing meals	<input type="checkbox"/> Musical skills & interests:
<input type="checkbox"/> Hospitality/parties/receptions	<input type="checkbox"/> Liturgist, ushering
<input type="checkbox"/> Scrapbooking	<input type="checkbox"/> Sound Engineer
<input type="checkbox"/> Hospital & homebound visits	<input type="checkbox"/> Deacons
<input type="checkbox"/> Event planning/coordinating	<input type="checkbox"/> Elders
<input type="checkbox"/> Counseling/caring	<input type="checkbox"/> Support Commission
<input type="checkbox"/> Sponsoring youth/children's events	<input type="checkbox"/> Proc. & Worship Commission
<input type="checkbox"/> Bereavement/providing meals for the recovering/sick	<input type="checkbox"/> Cong. Life & Miss. Commissions
<input type="checkbox"/> Praying	<input type="checkbox"/> Spiritual Growth Commission
<input type="checkbox"/> Childcare/nursery care giver <input type="checkbox"/> Sunday a.m. <input type="checkbox"/> Other Times	<input type="checkbox"/> Flower Arranging/delivering

Other interests & comments: _____

