



**Adult Application:  
High School Ministry Leadership Council**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Names/Ages of Children:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which school(s) do your children attend?

\_\_\_\_\_

Why would you like to be on the High School Ministry Leadership Council?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you participated in other youth-focused activities? If YES, describe.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will you be available for monthly meetings and to attend ministry activities throughout the year?

YES \_\_\_ NO \_\_\_ SOMETIMES \_\_\_

What are 3 ideas or activities you would suggest for the High School Ministry?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_