

# Peer Leader Application



## Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
School & Grade	
E-Mail Address	

## Availability

What activities do you plan to be involved in next year?

Fall: \_\_\_\_\_

Winter: \_\_\_\_\_

Spring: \_\_\_\_\_

## Interests

Please indicate which areas of ministry you would be interested in participating in.

Class Assistant

Skit Team

Small Group Leader

Planning Team

Other:

## Peer Leader Info

Please share why you want to be a Peer Leader and the gifts and talents you'll bring to the Peer Leader Program. (Everyone has gifts and talents to share. We want to know about yours.)

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## Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

