

Application Form for Christ Lutheran Church

I acknowledge that I have read and understand the Child Protection Policy for Christ Lutheran Church, and agree to abide by its terms and conditions.

Name _____ **Birth Date** _____

Address _____

Home/Cell Phone _____

Driver's License Number _____

Auto Insurance Carrier/ Policy Number/ Expiration _____

Have you ever been accused or convicted of sexual molestation, child abuse, or a felony?

Signature _____ **Date** _____

