



VILLAGE
CHAPEL
of Bald Head Island

Minister Information Form

Ministers Name: _____

Spouse Name: _____

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Church Name: _____

Address: _____

Denomination: _____

Work Phone: _____

Sponsors/Property Owner Name: & Address: _____

Willing to Serve on Sub List: _____

In Order for us to learn a little more about you, please feel free to attach a Resume' or CV to this form if you would like to.