



**PRESENT EMPLOYMENT:**

Name of Company:	Briefly describe type of work performed:

**PRESENT VOLUNTEER POSITIONS:**

Name of Company:	Briefly describe type of work performed:

**EDUCATION:**

	Name and Location:	Course Taken:		Year Completed:	Year Graduated:
High School:					
College:		Major:	Degree:		
College:		Major:	Degree:		
College:		Major:	Degree:		
Other:					

**MEDICAL:**

Our desire is to ensure that you are well cared for. None of the answers below will have any bearing on your presence at the workshop, but will be kept on file in case of an emergency or in order to make preparations for your unique care should medical attention becomes necessary. All information will be kept confidential and will only be shared with with medical personnel as needed.

DO YOU HAVE ANY KNOWN ALLERGIES?      YES      NO

[Medicine, Food, Insect (Bee / Wasp), Animal (dog / cat), etc]

IF YES, PLEASE LIST: If additional space is needed please use back of page

- |          |                   |             |                        |                  |
|----------|-------------------|-------------|------------------------|------------------|
| 1. _____ | Treat w/ Benadryl | Have EpiPen | Seek Medical Attention | Life Threatening |
| 2. _____ | Treat w/ Benadryl | Have EpiPen | Seek Medical Attention | Life Threatening |
| 3. _____ | Treat w/ Benadryl | Have EpiPen | Seek Medical Attention | Life Threatening |

Although you are not required to list chronic medical conditions or blood disorders such as HIV/AIDS, Hemophilia, or Cancer, etc., in case of an injury we would appreciate being informed of any serious medical conditions and/or infectious diseases /disorders when on site. This will allow the workshop staff to be as prepared as possible to provide any and all care needed as well as be able to inform any and all medical personnel so that special attention can be given when necessary.

Major Medical Conditions: \_\_\_\_\_

Should you attend the Bringing WORSHIP to Life NASHVILLEworkshop, we request that you keep a list of all chronic medical conditions as well as a list of all prescription medications presently being taken on your person at all times.

**EMERGENCY CONTACT INFORMATION:**

EMERGENCY CONTACT NAME: \_\_\_\_\_

EMERGENCY CONTACT RELATIONSHIP WITH APPLICANT: \_\_\_\_\_

EMERGENCY CONTACT HOME PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

EMERGENCY CONTACT BUSINESS PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

EMERGENCY CONTACT CELL PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

EMERGENCY CONTACT VP NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**PERSPECTIVES OF PERFORMANCE INTERPRETING:**

We want to get to know you! Please take a moment to answer the questions below:

1. What caused your initial interest in Worship/Musical Interpreting? \_\_\_\_\_

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

2. Have you attended a Bringing the Stage to Life Workshop? YES NO If yes, what city? \_\_\_\_\_

3. Have you received prior training in Worship /Performance Interpreting? YES NO If yes, please explain? \_\_\_\_\_

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

4. Briefly explain your Worship Interpreting experience: \_\_\_\_\_

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

5. What type of venues have you interpreted Worship music: \_\_\_\_\_

\_\_\_\_\_

6. What type of religious setting have you interpreted in?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

7. What makes a great Worship Interpreter? \_\_\_\_\_

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

8. What is your biggest struggle as a Worship Interpreter? \_\_\_\_\_

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

9. What is your most successful attribute as a Worship Interpreter? \_\_\_\_\_

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

10. What intimidates you about Worship Interpreting? \_\_\_\_\_

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

11. Favorite YouTube videos/interpreters: \_\_\_\_\_

\_\_\_\_\_

12. Feedback: I feel comfortable in my skills therefore consumer and/or instructor feedback feels superfluous.  
 I am neutral about feedback, I can take it or leave it.  
 I don't enjoy feedback but I know I need it.  
 I am desperate for feedback.

13. What motivates you to apply to this workshop? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

14. What do you hope to gain from the BWLN workshop? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

15. Does the Interpreting/Deaf Community intimidate you? If so, why? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

16. If you could choose to include specific skill building activity(ies) in the BWLN workshop, what activity(ies) would you choose to do? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

17. If you could choose NOT to include specific skill building activity(ies) in the BWLN workshop, what activity(ies) would you choose NOT to do? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What is your confidence level?

1	2	3	4	5	6	7	8	9	10
Low				Moderate					High

Please include along with your completed application:

Photo

Audition Video which should include the following:

A Signed Introduction

- \* Introduce yourself
- \* Give a brief synopsis of where you are from and your experience with performance interpreting
- \* A brief synopsis of why you are interested in attending Bringing WORSHIP to Life NASHVILLE

Two Interpreted Songs

- \* One popular Christian music selection
- \* One Worship selection

The quality of the audition video is not of concern and will only affect your acceptance if seeing your signs becomes significantly difficult thereby not allowing it to be fully evaluated. Make sure the audition video has working audio. The video can be taped in any manner but must be clear.

Please submit audition videos, application, and additional information listed above via the below options:

**REGULAR MAIL:**

Gate Communications  
 BWL NASHVILLE Application  
 330 Mallory Station Rd, Ste 10  
 Franklin, TN 37067  
 USA

**ELECTRONIC SUBMISSIONS:**

- \* Email your application and photo to [workshops@gatecommunications.org](mailto:workshops@gatecommunications.org)
- \* Email your videos via WeTransfer or Dropbox, or upload your videos to YouTube or Vimeo and send us the links

**CURRENT RELIGIOUS AFFILIATION:****Christian Denominations**

Anabaptism	Baptist	Church of God	Methodist	Presbyterian
Anglican	Catholic/Orthodox	Episcopal	Nazarene	Reformed
Assemblies of God	Church of Christ	Lutheran	Non-denominational	Seventh Day Adventist
United Pentacostal	Other: _____			

**Alternative Religions**

Agnostic	Buddist	Jewish	Pagan	Wiccan
Atheist	Hindu	Latter Day Saint	Scientologist	
Ba-hai	Jehovah's Witness	Muslim	Unitarian	
Other: _____				

It is the policy of Gate Communications not to discriminate when evaluating potential workshop attendees based on an individual's race, color, religion, sex, national origin, height, weight, marital status, political belief, genetic information, disability or handicap.

**CERTIFICATION:**

By signing this application I state that all the information herein is true and accurate to the best of my knowledge.

Upon signing this application I am entering into a hold harmless agreement with Gate Communications and all of the Staff and Board members of the organization. I agree that I will not hold Gate Communications or any of the Staff members or Board members responsible should any injury or harm take place to my person or belongings while a part of the Bringing WORSHIP to LIFE NASHVILLE workshop.

I also agree with my signature to allow Gate Communications to use any video footage as well as still photos that may be taken during the course of the Bringing WORSHIP to Life NASHVILLE workshop for educational and advertising purposes.

By signing this application I understand and agree to uphold the policies dictated and required by the event site and Gate Communications which includes no alcohol, drugs, smoking, sexual activity, pornography, or theft while at the retreat center. I also agree to refrain from the use of illegal drugs and/or driving while intoxicated while a part of the Bringing WORSHIP to Life NASHVILLE Workshop. I understand that if these policies are ignored or violated Gate Communications or the retreat center can dismiss me from the workshop and I will not be provided with any form of a refund.

My signature on this application signifies that I agree to not act inappropriately with artists and their personnel, or while visiting alternative educational sites while a part of the Bringing WORSHIP to Life NASHVILLE Workshop. "Inappropriately" is defined as rude, aggressive, extremely loud, or offensive behavior. Acting inappropriately could result in my presence being removed from the workshop for the remainder of that specific day or permanently for the remainder of the workshop with no form of a refund being provided, and with no financial reimbursement for altered or newly incurred travel plans.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

# Housing and Meal Information

It is the desire of Gate Communications to make your housing arrangements as comfortable as possible. This workshop will be held at a retreat center and Individuals will be staying in a lodge on the campus. In the process of picking your roommates we want to make sure we find people who are a good fit for you. We cannot guarantee we will find roommates with your similar interests or preferences, however we will do our best to attempt to find roommates to whom you can relate. Fill out the answers to the best of your ability. Remember, these answers are only used for guiding housing arrangements and have no affect on whether or not you are chosen to participate in the workshop.

**Sleep Schedule:**                      Early Riser    Night Owl

**Gender:**                                      Male    Female    Transgender

**Please select the answers that best describe you:**

- |                            |                             |                                       |                   |
|----------------------------|-----------------------------|---------------------------------------|-------------------|
| I am a mom of young kids   | I am a mom of teenagers     | I am a mom with no kids in the house  | I don't drink     |
| I love to drink            | I am a light social drinker | I like to party                       | I am friendly     |
| I am a comedian            | I am active                 | I am a dare devil                     | I like safety     |
| I am rarely emotional      | I can be emotional          | I am very serious                     | I am pensive      |
| People frustrate me        | People rarely frustrate me  | I am dramatic                         | I am aggressive   |
| I am LBGTQQI               | I am straight               | I am definitely a Type A personality  | I am a thinker    |
| I love being around people | I have very few opinions    | I have a million opinions             | I am a listener   |
| I need my personal space   | I value my free time        | I am a workaholic                     | I am a cat lover  |
| I am loud                  | I like to sit still         | I don't like to sit still             | I am a dog lover  |
| I am a practical joker     | I love numbers              | I love history                        | I love literature |
| I am a feeler              | I am rarely satisfied       | I am usually satisfied                | I love to argue   |
| I have a bright outlook    | I am very religious         | I have no strong opinions on religion | I am liberal      |
| I am conservative          | I love politics             | I hate politics                       | I am artsy        |
| I am a tech geek           | I like to find the problems | I don't recognize problems            | I am easy going   |
| I tend to complain         | I am a talker               | I am quiet                            | I am giggly       |
| I rarely complain          | Hobbies: _____              |                                       |                   |

Are there any types of roommates you would prefer TO have or prefer NOT to have:

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**Meal Plan:**                      No Preferences    Vegetarian    Vegan    Gluten-Free

I do not eat: \_\_\_\_\_

Meals are pre-established by the campsite. We will do all we can to accommodate special request, however they cannot be guaranteed.