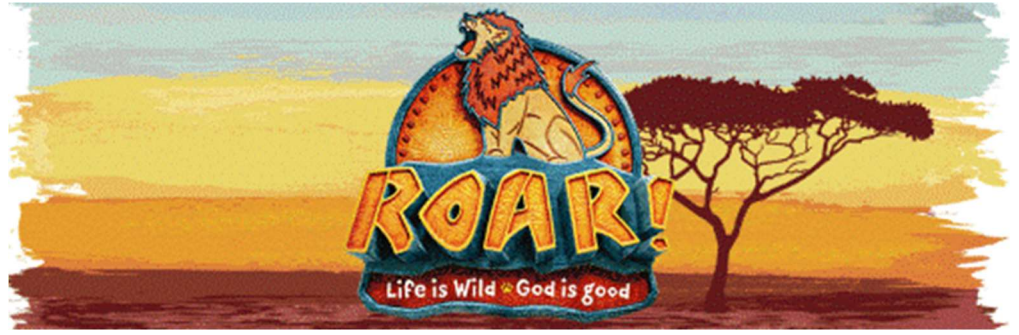


St. Stanislaus Kostka
Vacation Bible School
Volunteer
Registration Form
7th Grade – Adult
August 5 – 9, 2018
9:30am-1:15pm
(Volunteer hours)



Name of Volunteer: _____ Age: _____ / Adult

Grade if in school: _____ (Must have completed 7th Grade or above)

Address of Volunteer: _____

Home Phone: _____ Cell: _____

E Mail Address: _____

What area or age group would you like to work with? _____

I am available for the entire VBS _____ / I am only available _____

In Case of Emergency please contact:

Name: _____ Phone: _____

Address: _____

Please list any allergies/medical needs we should be aware of: _____

Is there anything else we need to know? _____

If you are under 18, parent must sign below:

My child has permission to volunteer for the St. Stanislaus VBS from August 5 - 9, 2019. I will have my child here by 9:30am and will pick up at 1:15pm. I also give permission for pictures/videos to be taken of my child.

(Pictures/video will only be used for internal purposes and will not be released to public without specific consent.)

_____ yes _____ no (checking no disallows any picture / video of your child's image in any presentation.)

Parent Signature

Date