St. Mary Mother of the Church

VACATION BIBLE SCHOOL

July 8-12,2024

(9:00-Noon)

Founders Hall

Volunteer registration

Volunteer Age requirement: Going into Freshman year of High School & up

| Volunteer First Name: | |
|---|---|
| Volunteer Last Name: | |
| Age: Gender: Male Female | |
| T-Shirt Size: Small Medium Large X-Large | |
| Grade (if applicable): | |
| Home Parish (if applicable): | |
| Allergies: | |
| Medical Issues or Special Needs: | |
| Parent Name (if under 18): | |
| Email: | |
| Cell Phone Number: | |
| Emergency Contact (first and last name): | |
| Emergency Phone: | |
| Are you Safe Environment trained? YesNo | |
| (16 yrs and older volunteers need to be Certified as per the Diocese of Lafayette. We will prov | vide training |
| to anyone who is not certified.) | |
| Area of Interest (please list up to three): | |
| Group Leader(high school jr or older), Group helper (high school freshman or older | r) |
| Station Coordinator (college student or older) | |
| Games, Skits (for both stations & morning skit), Science | |
| 1. 2. 3. | |
| | |
| Not guaranteed spot in area of interest | |
| Medical Release: I give my permission for the VBS staff to administer basic first aid to named above in the event of | |
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Return completed registration form to Church Office (419 Doucet Rd. Laf. 70503 or email to dgesser@diolaf.org)