

SES VBC Registration Entering 6th - 12th Grade Volunteer Application June 3-7, 2024 8:30 am - Noon



Volunteer			
First Name: Last Name: Gender:			
			☐ Male ☐ Female
			Age:
Grade (Entering 2024-2025)			
Select:			
Allergies / Special Needs?			
If you indicated an allergy, please be specific. T-shirt Size			
Select: Child M Child L Adult S Adult M Adult L Adult XL			
Assignment (optional):			
Group Leader / Jr. Leader			
Arts & Crafts Station			
☐ Snacks Station			
☐ Games / Rec Station			
☐ Bible Story Station			
☐ Music			
☐ Skits			
☐ Put me anywhere you need me!			

Please pick 3 choices of where you would possibly like to be assigned.

Parent / Guardian	
First Name:	
Last Name:	
Home Address	
Address Line 1:	
Address Line 2:	
City:	
State:	
Zip Code:	
Email:	
Phone Number:	
Emergency Contact	
Name:	
Relation:	
Phone Number:	
Alternate Phone:	

