



2019 OLL VACATION BIBLE SCHOOL  
VOLUNTEER REGISTRATION FORM  
MIDDLE/HIGH SCHOOL STUDENTS  
JULY 29-AUGUST 2 FROM 9AM-NOON

NAME: \_\_\_\_\_

GRADE (in the fall): \_\_\_\_\_ SCHOOL: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

PARENTS EMAIL ADDRESS \_\_\_\_\_

**EMERGENCY CONTACTS during VBS**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ALLERGIES OR MEDICAL CONDITIONS: \_\_\_\_\_

- Have you been a VBS volunteer before? \_\_\_\_\_
- Have you taken the Protecting God's Children training? \_\_\_\_\_
- CHOOSE at least 3 areas in which you would like to volunteer. (Rank 1, 2, 3,...)

Crew Leader \_\_\_\_\_ Snacks \_\_\_\_\_ Babysitting \_\_\_\_\_ Games \_\_\_\_\_

Opening/Closing \_\_\_\_\_ Photos/Bell \_\_\_\_\_ Crafts \_\_\_\_\_ Preschool \_\_\_\_\_

- Would you like to help with decorating during the week of July 22<sup>nd</sup>? \_\_\_\_\_
- Are you available ALL 5 days to help? \_\_\_\_\_

I hereby **DO** or **DO NOT** (please check one) give permission for my child, \_\_\_\_\_  
to have his or her picture taken while attending VBS at Our Lady of the Lakes. I understand that pictures will be  
used for church purposes **ONLY**.

PARENT NAME (printed): \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**RETURN FORM TO THE RELIGIOUS EDUCATION OFFICE BY JULY 1<sup>ST</sup>. LIMITED SPACE AVAILABLE**

Volunteer positions are limited and will be determined based on the order in which forms are returned.