



VBS 2020

June 22-26

Volunteer Registration Form

Saint Elizabeth Ann Seton Church

Name: _____

Age: _____ Curent Grade (for Youth Volunteers): _____

Parent's Email address: _____

Personal email if available: _____

Best phone to contact: _____ Adult T-Shirt Size: _____

Volunteer Experince:

Parent's Information (for Youth Volunteers)

Father's Name: _____

Mother's Name: _____

Address: _____

Father's CP Number: _____

Father's email address: _____

Mother's CP Number: _____

Mother's email address: _____

Emergency Contacts (after parents have been tried)

Name: _____

Cell Phone Number: _____

Relation to Volunteer: _____

We will help volunteers soar to new heights by affirming their gifts & abilities!

For more info, email louie@seasirvine.org