



2019 VBS Volunteer Form
June 18th - 21nd 9am - 11:30am

Help Us Get To Know You!
Bring your family and friends to volunteer with you!

VBS Contacts: Deb Janssen & Sue Anderson at deb.janssen345@gmail.com

Name _____ Grade _____ Former Volunteer? YES NO

Email _____ Phone _____

Volunteer Interest

When can you volunteer

Allergies YES NO Explain _____

Youth T-Shirt Size _____ Adult T-Shirt Size _____

Home Address _____

Responsible Adult Name _____ Email _____

Primary Phone # _____ Secondary Phone # _____

Pediatrician _____ Number _____

*If myself or my child is hurt or injured, and the responsible adult is unavailable, I give permission to Holy Cross Lutheran Church members do what is deemed best for my child at that moment in time.

*I give permission to post pictures of VBS. Anything released will have no names and reflect Holy Cross Lutheran Church's Christian philosophy/beliefs.

Responsible Adult

Signature _____ Date _____

To VOLUNTEER contact Deb Janssen & Sue Anderson deb.janssen345@gmail.com