

VBS 2018 Volunteer Registration Form

June 11 - 14

9:00 – 12:00 p.m.



All volunteers must fill out a completed Volunteer Registration Form by June 1 - please return form to the office or to Kelly Simon's mailbox at COH.

If you are going into 6th grade, you may either attend VBS or be a helper. For more information about volunteering, please call or text Stefani Lekkas at 651-347-9242 or the church office 763-753-2057

Volunteer Last Name _____ First Name _____

Grade Entering Fall 2018 (if youth) _____ M/F _____

Cell Phone _____

Email Address _____

Have you volunteered at COH's VBS in the past? Yes No

Parent's Name (if you are a youth volunteer) _____

Address _____ City _____ Zip Code _____

Home Phone _____ Cell _____

In case of an emergency contact _____

Relationship to volunteer _____ Phone _____

Please list allergies and medical concerns including physical limitations

Check if no known allergies

Allergies & Reactions _____

Medical Concerns _____

Mandatory Volunteer Meetings (Must attend one of these meetings)

Wednesday, June 6 at 6:00 p.m. **or**

Saturday, June 9 at 9:00 a.m. (Decorating after this meeting)

By signing, I release Cross of Hope and all employees and volunteers from any claims made by participant. My signature also indicates that I grant Cross of Hope the perpetual, non-exclusive, royalty-free right and license to record my participation and appearance on digital or film photography, video tape, audio tape or any other medium. This grant of rights is made voluntarily by me. I further agree to release and forever discharge Cross of Hope, its agents, employees, and designated representatives, from any and all claims in law or equity that I, my heirs or personal representatives, have or shall have arising out of Recordings.

Youth Signature _____ Date _____

Parent/Guardian or Adult Signature _____ Date _____

Office use only

Background check
completed for adult
Crew Leaders &
adult Pre-K Leaders