

Vacation School of Religion Volunteer Registration

T-shirt size _____ Adult/Child (circle 1) (volunteers only)

Adult Volunteers (18 years & older)

Name _____ Address _____

Email _____ Phone _____ Cell _____

Child Abuse Background check**	done	needed
VIRTUS Training**	done	needed
Registered at OLMC? <i>(An interview may be requested)</i>	YES	NO

Please list or explain your experience in working with children:

I will/will not need nursery for my child...3 yrs and younger

Yes	No	Child's Name _____	Age _____
		Child's Name _____	Age _____

Youth Volunteers (Rising 6th Graders and older)

Name _____ Age _____

Grade _____ Parent's Name _____ Phone _____

Why would you like to work in Bible School?

Parent Permission: I give my permission for my child to assist with Bible School. My child understands that they may need to accept direction from adults while involved in this ministry.

Parent Signature _____

**Please note that adults and youth 14 & over will be expected to complete form for Child Abuse Background check.

**Adults 18 years & over will be expected to complete VIRTUS Training.