



Volunteer Registration Form

Name _____

Address _____

E-mail Address _____

Phone Numbers: Home _____ Cell _____ Work _____

Home Church : _____

Allergies/Medical/Other _____

ADDITIONAL INFORMATION FOR YOUTH VOLUNTEERS

Date of birth _____ Age _____ Last school grade completed _____

Emergency Contact: Name Phone : _____

May Sunset United Methodist Church Have your photos on its website,
newsletter, and bulletin boards? Y N Parents signature if under 16 _____