

Lakefield VBS
August 14-18, 2017
Adult Volunteer Application



In our desire to reduce the risk of abuse, we believe this information is necessary to protect our children, our youth and our volunteers and to effectively place our volunteers in ministry positions. Thank you in advance for your partnership.

Personal Information

Full Name _____

Address _____

Postal Code _____ Email _____

Phone Number (H) _____

(B) _____

* Information received on this page is considered confidential and will be kept on file

*Please fill out the following pages so that we can discern where best to fit you into the program. These pages will not be kept on file and will be destroyed when the VBS camp is finished.

Spiritual History

What Church do you attend? _____

In a brief paragraph, please outline your spiritual journey.

List any gifts, training, education or other qualifications that have prepared you to minister with children or youth.

We require a current Police Check (within the last 2 years)

I have included a police check with the vulnerable section check with this application

Yes No

Do you give us permission to take your photo? (It may be used in future advertising)

Yes No

References

Please provide the names of three individuals, excluding relatives, who could provide a reference for you. Include at least one reference from outside the church.

1. Name of Reference _____

Day Phone _____ Evening Phone _____

How long have you known this person: _____

Address _____

Nature of Relationship _____

2. Name of Reference _____

Day Phone _____ Evening Phone _____

How long have you known this person: _____

Address _____

Nature of Relationship _____

3. Name of Reference _____

Day Phone _____ Evening Phone _____

How long have you known this person: _____

Address _____

Nature of Relationship _____

Signature of Applicant

Printed Name _____ Date _____