

Youth VBS Volunteer Information 2018



Volunteer's Name: _____

Age: ____ Grade: ____

Parent or Guardian's Name: _____

Parent E-Mail: _____

Youth E-Mail: _____

Home Phone: _____ Teen Cell: _____

Are you available to work every day during VBS (Monday - Friday from 5:30-8:30 pm)?

Yes

No

If no, what days and times are you available: _____

Parent--Please read and sign

I, _____, stand in support of _____ to serve in St. Joseph's Vacation Bible School. I understand the above listed time and date commitments that my child is volunteering for this VBS ministry.

Parent Signature

Date

I, _____, hereby grant permission for my child to be photographed and/or videotaped during Vacation Bible School (VBS). I understand that my child may decline to be photographed and/or videotaped at anytime. I further grant permission for the resulting photographs and/or videotaped footage to be edited, if necessary, and then published and/or broadcast for the purpose of promoting VBS and/or Faith Formation programs at St. Joseph Church.

Parent Signature

Date

Emergency Information

Emergency Contact (other than parent listed above): _____

Cell: _____ Relationship: _____

Family Doctor: _____ Phone: _____

Insurance plan and/or health card number: _____

Hospital of preference: _____

I, _____, hereby give my consent to any emergency medical or surgical care which may be needed and deemed necessary to my children named above while participating in VBS. I understand a reasonable attempt will be made to contact me before use of this consent is made.

Name

Date

If you have any questions about Vacation Bible School or your involvement in it, please contact Leah Monroe leah.monroe@stjoseph-elkgrove.net. Thank you for volunteering to help with VBS.

Please return completed forms to:

St. Joseph parish office located at 9961 Elk Grove-Florin Road, Elk Grove, CA 95624 no later than **Friday, June 9, 2018**. Volunteers will max out at 30 people. Priority will go to those who turn in their forms and money on time directly to the parish office.

Director Use Only

Center or Group: _____

Coordinator: _____

Training date attended: _____

Special Request: _____

I want to help as (please rank your top 3):

___ a group leader

___ a Bible Center assistant

___ a Craft Center assistant

___ a Game Center assistant

___ a Snack assistant

___ a Music Center assistant

___ a Bible Games Center assistant

___ a Preschool assistant

I really want to: _____

I really don't want to: _____

YOUTH CODE OF CONDUCT:

I agree to uphold and exemplify positive Catholic values, and I understand that my participation in this program requires compliance with rules and regulations regarding my conduct. Specifically, I agree that during my participation in the program:

- I will follow the directions of adult leaders and VBS Director;
- I will follow the rules that I am enforcing with the children;
- I will treat other volunteers with respect;
- I will treat all participants with respect;
- I will not gossip or talk about the children in their presence;
- I will bring any concerns to the Center Coordinator or VBS Director as soon as possible;
- I will stay with my assigned group, and participate in the approved activity;
- I will dress appropriately at all times;
- I will not use, bring, or be under the influence of illegal drugs or alcohol;
- I will not smoke or use tobacco products;
- I will not be in the possession of or use firearms, knives, or weapons of any kind;
- I will not engage in acts of violence, stealing, dishonesty, gambling, or profanity; and
- I will respect the physical property of the facility and of others, and will not engage in acts of vandalism.

I agree to abide by these rules and the supervision of adult leaders, and understand that violations will be dealt with in an immediate and appropriate manner. If I should be dismissed from participation in the program, I understand that my parents will be contacted to arrange for my immediate transportation home.

Signature of Youth Participant

Date

Signature of Parent (acknowledging the commitment)

Date

Vacation Bible School T-shirt

Shirts are \$10 per shirt. Please select your size below.

Youth Medium____ Youth Large____

Small____ Medium____ Large____ XL____ 2XL____ 3XL____

TOTAL NUMBER OF SHIRTS _____ x \$10 = _____

AMOUNT ENCLOSED WITH FORM = _____