

ADULT VOLUNTEER
2019 Registration Form
July 29-Aug 2 9-12:15pm
LAKEWOOD UNITED METHODIST CHURCH



Volunteer's Name _____

T-shirt Size: AS AM AL AXL AXXL

Child's name you are volunteering for
(if child is NOT ENTERING Kinder or younger) _____

Age/Birthday of Child _____

Volunteer Service Area Requested _____

I would like to serve with my child: Yes / No

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail _____

Have you attended Safe Sanctuary Training at LUMC? Yes No

**ALL VOLUNTEERS ARE REQUIRED TO COMPLETE SAFE SANCTUARY
TRAINING & TURN IN CERTIFICATE PRIOR TO VBS.
Online and in-house training dates to be announced.**

All VBS questions may be directed to Children's Ministries at 281-370-2273 x110
or children@lakewoodumc.org

For Office Use Only:

Date form received _____

Safe Sanctuary trained/updated _____

Group placed in _____