

VACATION BIBLE SCHOOL JULY 16th - JULY 20th 2018  
ADULT & TEEN VOLUNTEER SIGN UP SHEET

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
TEEN: \_\_\_\_\_ AGE \_\_\_\_\_ ADULT: \_\_\_\_\_ Email: \_\_\_\_\_

CHECK BELOW AREAS WHERE YOU CAN HELP

.PREP DAYS: 1-4pm: July 11<sup>th</sup> \_\_\_\_\_ July 12<sup>th</sup> \_\_\_\_\_ July 13<sup>th</sup> \_\_\_\_\_

SETUP: Saturday, July 14<sup>th</sup> 1:00pm \_\_\_\_\_ Sunday, July 15<sup>th</sup> 1:00pm \_\_\_\_\_

CLEAN UP: Friday July 20<sup>th</sup> - 1pm-2:30 pm \_\_\_\_\_ (lunch included)

(Select 1<sup>st</sup>, 2<sup>nd</sup> & 3<sup>rd</sup> choice below as some spots are filled)

<u>ADULTS</u>	<u>TEENS</u>
TEAM LEADER (10) _____	TEAM AIDE (10) _____
CRAFT LEADER _____	CRAFT AIDE _____
SNACK LEADER _____	SNACK AIDE _____
GAMES LEADER _____	GAMES AIDE _____
DRAMA LEADER _____	DRAMA TEAM _____
MUSIC LEADER _____	MUSIC AIDE _____
PHOTOGRAPHER _____	

Adults 18+ please indicate if you are current with Safe Environment Requirements:

SMV Video (one time only): YES NO

SAFE ENVIRONMENT (training every 3 years) YES NO

CRIMINAL BACKGROUND CHECK (every 3 yrs.) YES NO

Please write down your prep and set up days so you will remember the dates and times you have chosen.

**MEDICAL CONSENT AND PERMISSION TO TREAT**

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

To the best of my knowledge, \_\_\_\_\_ is in good health, and  
Child's name  
I assume all responsibility for his/her health.

In the event of an emergency, I give permission for \_\_\_\_\_ to be  
Child's name  
transported to a hospital or doctor.

Emergency contact person:  
Name: \_\_\_\_\_  
Relationship to me: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_  
Policy Number: \_\_\_\_\_  
Copy of Insurance Card (front & back) \_\_\_\_\_

If your child is taking medication please bring all medication clearly labeled.  
Please list the medication(s) and directions for taking this medication, including  
dosage, frequency and storage.

\_\_\_\_\_  
\_\_\_\_\_  
List any food/dairy/environmental allergies:  
\_\_\_\_\_  
\_\_\_\_\_

Are you child's immunizations current and up to date \_\_\_ Yes \_\_\_ No  
List any limitations/ restrictions concerning you child:

\_\_\_\_\_  
\_\_\_\_\_

## Teen Guidelines To Be Followed During VBS

1. Dress Code VBS: T-shirts, jeans, or shorts that are no shorter than 4 inches above the knee and tennis shoes. No sleeveless shirts, sandals or **short shorts**. Violation of this dress code will result in being sent home.
2. Cell phones must be turned off and in your pocket during all sessions from 9am-12pm. No electronic devices allowed. (iPods, iPads, Tablets, Earphones etc.)
3. Take your snack break only in the snack area.  
No food or drinks allowed in classrooms or outside.
4. You may not leave the grounds under any circumstances unless you check with the leaders in the area you are working.  
You may not leave your area and walk around the church grounds, down in the flood plain or go into any empty classrooms with other teens. If you are not where you belong or not following the guidelines, we will call your parents to come pick you up.
5. If you have a problem or a conflict please talk to your leader in the area in which you are volunteering.
6. If you are not able to come due to illness or appointments, etc, please leave me a voice mail ahead of time at ~~910-865-8877~~ 910-865-8877
7. Please do not go to the MAIN office for supplies or to use the phone. Come to the back office across from the Guadalupe room to find me.
8. Please keep track of your volunteer hours for school. Please bring your forms for me to sign on Friday.
9. Thank you for volunteering your time and talent to help with VBS. Please wait to make your crafts until we are sure there are enough crafts for the children. On Friday you can take home a picture of your group or of the station that you worked during the week.

TEEN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_