

VBS DAY CAMP VOLUNTEER FORM

NAME _____

PHONE _____

ADDRESS _____

EMAIL _____

CITY,ST, ZIP _____

Bethany requires all adults to have a background check completed before volunteering with children per our child safety policy. Please check with the office if you have not previously completed a background check with us.

PLEASE CIRCLE THE FOLLOWING DAYS & TIMES YOU ARE ABLE TO VOLUNTEER

AM SESSION (8:45AM – 12:15PM)

SNACK & LUNCH PREP & SERVE (10AM – 1PM)

PM SESSION (11:45AM – 3:15PM)

MONDAY TUESDAY WEDNESDAY THURSDAY

PLEASE CIRCLE IF YOU WOULD BE WILLING TO DONATE FOOD FOR THESE MEALS

EWALU Staff Breakfast

Morning Snack

Morning Drink

Camp Lunch

PLEASE CIRCLE THE EVENING YOU WOULD BE WILLING TO HOST THE EWALU COUNSELORS FOR SUPPER

MONDAY TUESDAY WEDNESDAY

WE WILL BE SENDING OUT ASSIGNMENTS FOR DONATIONS OF TIME AND FOOD THE LAST 2 WEEKS OF MAY

PLEASE RETURN THIS FORM BY MAY 15TH TO BETHANY LUTHERAN CHURCH OFFICE OR MAIL TO: PO BOX 236 WEST BRANCH

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