

# 2019 Vacation Bible School

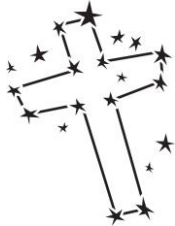
## Volunteer Form



★ July 22 – 27, 2019 ★

Monday – Friday    ▶    8:15am – 12:30pm  
 Saturday Party     ▶    9:30am – 12:00pm

Volunteers are essential toward putting together our summer Vacation Bible School. If you'd like to participate in a classroom and/or activity center, please sign up. It's a great way to serve and we'll find a place suited for you! A staff nursery is provided for your young children.



**To be a volunteer, you must** (check the boxes that are true):

- Know Jesus Christ as your personal Lord and Savior
- Regularly attend Bread of Life Church
- Be a responsible team-player

If any of the above are UNTRUE, please indicate the reason(s) you would still like to volunteer on the back of this form. We will review your application and determine eligibility.

**Please indicate all areas of interest**



I would enjoy serving in the classroom as a:

- |   |          |                 |                 |                 |                 |                 |                 |          |
|---|----------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|----------|
| <input type="checkbox"/> Teacher:           | K        | 1 <sup>st</sup> | 2 <sup>nd</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> | 5 <sup>th</sup> | 6 <sup>th</sup> | anywhere |
| <input type="checkbox"/> Assistant Teacher: | K        | 1 <sup>st</sup> | 2 <sup>nd</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> | 5 <sup>th</sup> | 6 <sup>th</sup> | anywhere |
| <input type="checkbox"/> Class Helper:      | anywhere |                 |                 |                 |                 |                 |                 |          |

I would be happy to help in any of these areas:

- |  |   |
|--|---|
| <input type="checkbox"/> Craft Center  | <input type="checkbox"/> Morning Check-In Table |
| <input type="checkbox"/> Music Center  | <input type="checkbox"/> Painting & Decorations |
| <input type="checkbox"/> Recreation Center   |   |
| <input type="checkbox"/> Snack Center  | <input type="checkbox"/> Saturday Morning Party |
| <input type="checkbox"/> Staff Nursery/Preschool   |   |
| <input type="checkbox"/> I <u>cannot</u> attend VBS, but can help with preparations/decorations/shopping |   |

### Availability

- Everyday!  
(Monday – Saturday)

*I can only help:*

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday



Name \_\_\_\_\_ Fellowship \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

I am a youth volunteer. If so, my age is: \_\_\_\_\_

I will bring my children to the Nursery: \_\_\_\_\_

names & ages

backside please



# Medical Release Form

I/We, the undersign, \_\_\_\_\_, do hereby authorize Bread Of Life Church leaders as agent(s) for the undersigned and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medicine Practice Act whether such diagnosis or treatment is rendered at the office of said physician or at a hospital.

It is understood that if authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of the aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment of hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. This authorization shall remain effective **July 22 to 27, 2019** unless sooner revoked in writing delivered to said agent(s).

Signed \_\_\_\_\_  
to be signed by guardian for volunteers under 18 years old

Date \_\_\_\_\_

Doctor's Name \_\_\_\_\_

Phone \_\_\_\_\_

Please list any required medication, special conditions, or medical needs which may apply to yourself or your children in the Nursery.

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