



Spring Branch Presbyterian Church, 1215 Campbell Rd.
Vacation Bible School: Monday-Friday, June 9-13, 9:00 – 11:30 a.m.

Youth Volunteer Information Form (under age 18)

Volunteer's Name: _____

Date of birth: _____ **Age:** _____ **Last school grade completed:** _____

Parent/Guardian Name: _____

Address: _____

E-mail Address: Parent: _____

Youth: _____

Phone Numbers: Parent Cell _____ **Volunteer Cell** _____

Check the days you are available to volunteer:

____Monday ____Tuesday ____Wednesday ____Thursday ____Friday

Allergies/Medical Information/Other _____

Emergency Contacts:

Name _____ **Phone** _____

Name _____ **Phone** _____

Dismissal Information:

Name(s) of person(s) who may pick up this volunteer from VBS (if volunteer is not driving):

*Forms should be returned to the church office or emailed to jballesteros1103@gmail.com.
savannah@springbranchpres.org.*