

****NOTE:** All volunteers, 18 yrs & older, must be VIRTUS trained and complete a background check **

Printed Name: _____

Email: _____

Phone: _____



Volunteer Positions during VBS:

Number in order (1-7) from most desired (#1) to least desired (#7).

Snack Leader Music Leader Craft Leader

Games Leader Class teacher Classroom Aide Nursery Leader

T-Shirt size (S-XL):

VIRTUS information (Check one):

- Yes, I have already completed the VIRTUS training and background check.
- No, I have not completed either the VIRTUS training or the background check. I am willing to meet this requirement.
- I am not sure if I have completed the VIRTUS training or the background check previously. Please check for me.

Additional Requests:



I have a child attending VBS and I would like to be involved in his/her class.

Names & grade of student (if multiple children, indicate which class you'd like to help in):

1. _____

2. _____

3. _____

Volunteer Signature: _____

Date: _____