

Grace Baptist Church 2020 – 2021 Adult Volunteer Enrollment Form

Name:				
Date of Birth: (mm/dd/year)		Gender:	Shirt Size:	
Street Address:				
City:	State:		Zip:	
Home Phone:		Cell Phone:		
E-mail:				
Emergency Contact Name and Phone:				
Grace Baptist Church Member: yes no	If no, where:			
AWANA Service History Club (i.e. Sparks) Role (i.e. Leader)	Dates	Church		
AWANA Training History (i.e. Completed C		-		
Service Opportunities Please circle all ages with which you are interest of the service of the s	and 4 yr olds) grades) erested. up Time Secrestore Store	Sparks (K-2 gr Journey (9-12 gr etary Listene e Helper	grades) er	
I have read and agree to the terms and con	ditions stated abov	/e.		
Volunteer Signature			Date	
For Office Use:				
Club: Role:	Back	Background Check Complete date:		
Ministry Application Date:	AWA	AWANA Training Complete		
Email:				