



Adult Volunteer Application Form



**Jubilee United Church Vacation Bible School
40 Underhill Drive, Toronto; 416-447-6846 ext. 104**

August 16 – 20, 2010

Friendship Idol Vacation Bible School is a volunteer staffed program hosted by Jubilee United Church. We welcome volunteers willing to be positive role models for the children participating in our program, bringing Christ alive by creating a safe, loving and playful community of faith. If you enjoy working with children and would like to be a Friendship Idol Program Leader please complete the following application form and return it to our VBS Director, Lee-Ann Ahlstrom.

Name: _____ Phone: _____

Address: _____

What position are you volunteering for?: _____

Please mention your two most recent experiences working with children:

When	Where	Supervisor & Contact #
_____	_____	_____
_____	_____	_____
_____	_____	_____

What training, experience and/or talents will you bring to our children's camp? _____

What would you look forward to the most about being a volunteer at our children's camp? _____

Duty of Care and References:

The United Church of Canada requires that any program offered to high risk groups must engage in Duty of Care practices. Planning programs to prevent injury and abuse is a primary focus as well as adequate screening of volunteers. Your assistance in following Duty of Care practices is required as a volunteer.

Can you provide an up to date police records check? Y N _____

If you do not currently have an up to date police records check would you be willing to apply for one if necessary? (circle one) Y N
(if No why not) _____

Can you provide the names of 2 references (preferably not the current church staff or a family member):

Name	Relationship	Phone Number

Health Information:

Healthcare number: _____

Name of Emergency Contact: _____

Phone number of emergency contact: _____

Date of your last tetanus shot: _____

Please list any allergies:

Allergy	Treatment

Are there any other health related issues or concerns that we should be aware of?

Training Expectations:

Training sessions will be provided and full participation is required. If you cannot make a training session you must contact the Director in advance.

Volunteer Agreement:

The information on this application form is an honest and accurate representation of my experience, condition of health and qualifications as a volunteer working with children.

Name (print) _____ Signature _____

Date: _____