

VBS YOUTH LEADERSHIP REGISTRATION FORM

Leadership positions will be assigned prior to VBS.
Turn in your form by July 1st to secure your position.



July 8 - 12, 2024

9:00 am - 12 noon

Park Lake Presbyterian Church

309 East Colonial Drive • Orlando, FL 32801
407-841-6550 • www.plpc.org



Youth's name: _____ Age: _____

Parent/Guardian's name: _____

Address: _____ City: _____ Zip: _____
Required

Home phone: _____ Work phone: _____

Parent/Guardian cell: _____ Parent/Guardian cell: _____

Parent's email address: _____

Youth's email address: _____ Youth cell phone: _____

SPACE IS LIMITED - CIRCLE TWO areas where you would like to volunteer:

Skits Games/Recreation Bible Story Snacks Crafts Science PreK K 1-2nd 3-5th

Please circle the days you can assist with VBS: M T W TH F

Are you a member of Park Lake Presbyterian Church? Yes No

If no, where do you attend church: _____

Allergies or other medical conditions including food allergies: _____

In case of emergency, when the parent/guardian cannot be reached, please contact:

Name: _____ Phone: _____

Relationship: _____

| | |
|---|---------------|
| COVENANT | |
| By accepting the job of Youth Volunteer, I agree to | |
| <ul style="list-style-type: none">• arrive every day of VBS at 8:30 to pray and prepare for the day ahead.• treat the children with respect and love and will not post photos of them on social media. | |
| _____ Signature | _____ Date |

I hereby give authorization for my youth to assist at Park Lake Presbyterian Church VBS and to have their photo taken during the VBS events and also give my permission for photos to be used in the Park Lake Presbyterian Church newsletter, website or other publications.

Parent/Guardian's Signature _____

_____ Date