



Volunteer Permission Slip (Ages 14-18)

I give my permission for _____ to participate as a volunteer at the
PARTICIPANT FULL NAME
2018 Night to Shine, sponsored by the Tim Tebow Foundation hosted by St. Andrew's UMC at
the DeSoto Community Center on Friday, February 9, 2018.

Volunteer Information

Age/DOB: _____

Gender: Female Male

Address:

City: _____ State: _____ Zip Code: _____

Phone: _____

Parent / Guardian Phone (Home):

Parent / Guardian Phone (Cell):

Desired Volunteer Role (check all that apply):

Buddy for guest Event volunteer

Signed _____ Date _____
(Parent / Guardian)

Remit form to: St. Andrew's UMC | 1004 Rock Rd | DeSoto, MO 63020
secretary@standrewsumcdesoto.org