

ADULT VOLUNTEER REGISTRATION FORM

Name _____

Cell phone _____

Email _____

I want to be involved in sharing the Love of our Lord this summer at ELC. Please note that volunteer options are separated into VBS (3yo-K) and Day Camp (1-5th Graders)
(Circle the day of the week when indicated.)

VBS – CAMP LOL

___ I would love to help coordinate **VBS** with Jen

___ I will bring a snack for **VBS** on: M T W R

___ I will serve & clean up snack for **VBS** on: M T W R

DAY CAMP With Sugar Creek

___ I will help the SC Staff with **Day Camp** all week: AM PM All Day

___ I will bring snack for all **Day Camp** attendees on: M T W R

___ I have a talent/skill I'd like to share one afternoon for **Day Camp**

___ I would love to **host Sugar Creek staff** at my house Sunday through Thursday and serve them breakfast Monday - Thursday

___ I would love to **host Sugar Creek staff** for dinner on M or W

___ I would love to bring **lunch for Sugar Creek** staff on: M T W R

Please return this form by 6/5/2016