

CROSS OF GLORY  
VACATION BIBLE SCHOOL  
VOLUNTEER

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

SCHOOL \_\_\_\_\_

GRADE ENTERING IN SEPTEMBER \_\_\_\_\_

DO YOU NEED A LETTER FOR YOUR VOLUNTEER WORK?

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PARENTS' NAMES \_\_\_\_\_

PARENTS' PHONE NUMBER \_\_\_\_\_

PARENTS' EMAIL ADDRESS \_\_\_\_\_