

Family @First Student Volunteer Team

APPLICATION

Basic Information

Name: _____

Address: _____

Phone (s): (H) _____ (C) _____

Email: _____ Parent Email: _____

Parent/Guardian's Name(s) : _____

Grade: _____ Gender: Male Female School: _____

Just for Kicks

Favorite Thing to do for fun: _____

Favorite type of music/Fav band: _____

Favorite Movie/TV Show: _____

Your Relationship with God:

1. Please share when and how you became a Christian:

2. Please share what you are doing to continue to grow in your faith in Christ:

3. Why do you want to be on the **Family@First Student Volunteer Team?**

4. How would your friends describe your relationship with God?

5. How would your family describe your relationship with God?

6. What specific area and hour would you be willing to assist?

(Note: Minimum age to volunteer with **First Steps NURSERY*** are those currently in 7th grade.
Minimum age to volunteer with **First Steps PRESCHOOL*** are those currently in 7th grade.
Minimum age to volunteer with **First Kids (K-4th)** are those currently in 8th grade.
Minimum age to volunteer with **56th & First** are those currently in 9th grade.
**Those younger can help with parental supervision/ involvement.*

Please circle the area/hour you are interested in serving:

First Steps Nursery	Sun 8:30am	Sun 9:45am	Sun 11:00am	Wed 7:00pm
First Steps Preschool	Sun 8:30am	Sun 9:45am	Sun 11:00am	Wed 7:00pm
First Kids	Sun 8:30am	Sun 9:45am	Sun 11:00am	Wed 7:00pm
56 th & First	Sun 8:30am	Sun 9:45am	Sun 11:00am	Wed 7:00pm

PARENT PERMISSION

I, _____, the parent of _____, understand the requirements my child is committing to. I will help them in being faithful by providing transportation and/or supervision when necessary and assist them with communication and planning when necessary.

Parent Signature Date

Student Signature Date