

Program for which you are applying:

Today's date: _____

TEEN Volunteer Application for Children & Family Ministry

Davidson United Methodist Church, 233 South Main Street, Davidson, NC 28036

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial _____

Birthdate: _____ Gender: _____ Current grade in school: _____

Address: _____ City & State _____ Zipcode _____

Best phone number to call: _____ Best number to text: _____

E-mail Address (yours or parent's): _____

Preferred method of being contacted? Phone call Text E-mail Does not matter

AVAILABILITY (Check all that apply.)

- I am available Sunday mornings.
- I am available Sunday evenings.
- I am available for future summer camps.
- I can complete tasks during the week, such as preparing crafts, making copies, etc.

Will you be turning in hours for community service hours and need staff to sign a form? _____

TELL US A LITTLE ABOUT YOURSELF

What school do you attend? _____

What experience have you had with children? _____

How long have you been associated with DUMC? _____

Share a brief story about something positive that has happened for you at DUMC (or any church).

Thank you for applying! We will be in touch soon and look forward to meeting with you.

DAVIDSON
UNITED
METHODIST
CHURCH