

Barnabas Landing APPLICATION FORM FOR ONE -WEEK VOLUNTEER POSITIONS

| Last Name | e: | | First Name: | | |
|------------------|--------------------|-------------------|--------------------------|--|-------|
| Address: _ | | | | | |
| | | | Postal/Zip Code: | | |
| Phone: (|) | Age: | Churc | ch: | |
| Email: | | | | _ | |
| Position(s | a) Applying for: | □ Kitchen | ☐ Flower gardening | ☐ Maintenance/Grounds Keeper | |
| Summer \ | Week Available: 1 | st Choice: | | 2 nd Choice: | |
| <u>Experienc</u> | e in area for whi | ch you are apply | ving: | | |
| | | | | | |
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| | | | | | |
| What crea | ated your interes | t in serving with | Barnabas Family Minist | ries? | |
| | | | | | |
| | | | | | — |
| What con | tributions do you | ı think you can r | make at Barnabas? | | |
| | | | | | |
| | | | | endangering the welfare of a child such as | child |
| • | | • | gainst a person, such as | assault, etc.? Yes □ No □ | |
| Is there a | nything else you | want us to knov | v about you? | | |
| Do you hav | ve any medical cor | ditions we should | d be aware of? | | |
| | | | | | |

When completed, please email to: summer@barnabaslanding.com

Website: barnabaslanding.com