



# John 3:16 Mission

## Student Volunteer Application

Student's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Sex: Male  Female  Birth date: \_\_\_/\_\_\_/\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_  
List any known medical condition or allergies: \_\_\_\_\_

### Parent/ Guardian Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Relationship: Mother  Father  Grandparent  Foster Parent  Legal Guardian  Other: \_\_\_\_\_  
Address: \_\_\_\_\_ Apartment Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email Address: \_\_\_\_\_

### Emergency Contact Information Other Than Parent/ Guardian

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Consent and Medial Release** – I give permission for my child to participate in activities provided through John 3:16 Mission. I give the John 3:16 Mission staff or ministry workers permission to transport my child to and from John 3:16 Mission. I understand that **John 3:16 Mission**, its employees and agents, are not liable for any injury my child might incur as a result of my child's work as a volunteer for them, and I will hold **John 3:16 Mission**, its employees and agents, blameless should my child incur any injury resulting from their work as a volunteer for **John 3:16 Mission**. If for any reason a medical emergency should occur, I authorize the John 3:16 Mission staff or ministry workers to secure medical care immediately. I understand that all expenses incurred in obtaining medical treatment **will not** be the responsibility of John 3:16 Mission, its employees and agents. I understand that the involvement of my child in these programs is based on my child's active participation and responsible behavior at all activities. I understand that photographs of my child participating in John 3:16 Mission activities may be used in Mission publications or displays.

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Student Commitment

#### Doctrinal Statement & Qualification for Volunteers:

I have received a copy of John 3:16 Mission Inc's Qualification for Volunteers and the Doctrinal Statement. I agree to abide by all regulations stated for all John 3:16 Mission volunteers and also agree to the Doctrinal Statement of John 3:16 Mission Inc.

#### Volunteer Rights & Responsibilities:

I have received a copy of John 3:16 Mission Inc's Volunteer Rights & Responsibilities. I agree to abide by all policies provided in the Volunteer Rights & Responsibilities. I further understand that failure to abide by these policies may result in removal from my position as a John 3:16 Mission Volunteer.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_