

Aglow Generations Volunteer Form

This form is to be completed by all those involved in the care and supervision at Aglow International Generations Meetings and Events. It is being used to help Aglow provide a safe and secure environment for children and families who participate in our programs, meetings, and events in various locations and venues.

Name			Date		
Last	First	Middle			
Address					
Street	City	7	State	Zip	
E-Mail Address		Phone			
Marital Status	Spo	Spouse Name (if married)			
Number of Children	mber of Children Ages				
Emergency Contact (Na	me and Number)				
How long have you bee	n a part of Aglow	International?			
What leadership/voluntoministry, or other voluntype of work).	teer or employed	•	dren and youth	(identify place and	
Occupation		_ Place of Employ	yment		
Work Phone					

Do you have any training or certifications that would enhance your work with our children/your (example: CPR, First Aid, etc.) If yes, explain:				
Refere	ences: Please list 2 people who are not	t related to you by blood or marriage as references.		
Please	only list people who have known you	ı for at least 3 years.		
1.	Name			
	Phone			
2.	Name			
	Address			
	Phone			
	Relationship to Reference			
crimin impain that A with f benefi proper photog	al record, to include crimes against chement that would or should prevent my glow International does not assume art anancial or other assistance, including its or insurance of any nature in the every. I grant and convey to Aglow Internationals, images, video, or audio record	, represent that, I am a legal citizen of the felony or misdemeanor convictions, charges or nildren. I am in good health and suffer no physical y participation in Volunteer activities. I understand my responsibility for, or obligation to, provide me but not limited to medical, health, or disability tent of my injury, illness, death, or damage to my national all right, title, and interests in any and all lings of me or my likeness or voice made by Aglow		
	ational in connection with my volunte	eer provided services. Date		
Signat	uic	Daic		