



Volunteer Permission Slip (Ages 14-18)

I give my permission for _____ to participate as a volunteer at the

PRINT PARTICIPANT FULL NAME

2019 Night to Shine, sponsored by the Tim Tebow Foundation at CrossPoint Church

on Friday, February 8, 2019 at the Trussville Civic Center.

Volunteer Information

Age/DOB: _____

Gender: Female: Male:

Address:

City: _____ State: _____ Zip

Code: _____

Phone: _____

Parent / Guardian Phone (Home):

Parent / Guardian Phone (Cell):

Desired Volunteer Role: _____

Signed _____

Date _____

(Parent / Guardian)

