

Forgiven Ministry Volunteer Application

Phone: 828-632-6424

Toll Free 866-584-7534

Camp Date & Location

Fax: 828-632-6434

Please write clearly.

Name: (as on license): _____

Name: (preferred on name tag): _____

Address: (Please include city, state and zip code) _____

Phone: (Home): _____

(Work): _____

Date of Birth: _____

Driver's License: _____

Social Security # _____

Email: _____

Gender: Male Female _____

Shirt Size: (Please circle): _____

S M L XL 2XL 3XL 4XL Other: _____

1st Time Volunteer in a Correctional Facility: Yes No _____

Have you ever been convicted of a crime? Yes No _____

Have you attended a "One Day with God" Camp Training: _____

Area of Volunteer Service that I would prefer: (please check)

Child Mentor: _____

Parking/Transportation: _____

Prison Food Team: _____

Caregiver Volunteer: _____

Craft Team: _____

Floaters: _____

Music: _____

Face Painters: _____

Registration: _____

Sponsor a Child: \$ _____

Photographer: _____

Deaf Interpreter: _____

Games: _____

Spanish Interpreter: _____

Mailbox Club: _____

Caregiver Food Team: _____

Artist: _____

Prayer Team: _____