

Church of Our Lady of the Miraculous Medal  
**VOLUNTEER APPLICATION FORM**

Please print clearly

Name: \_\_\_\_\_ ☐ 18 or Over? ☐ Male ☐ Female

*Dear Volunteer,*

*Thank you for offering your time and talents to work with the children and youth of our parish. People such as you are indispensable to our programs. Because you will be working with young people under age 18, we need some basic information about you to be compliant with the diocesan Protecting God's Children (PGC) program. Please complete this form and return it to either our PSR coordinator or the Parish Office.*

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Have you had a recent BCII or FBI background check? ☐ Yes – Date: \_\_\_\_\_ ☐ No

Have you attended a PGC workshop? ☐ Yes – Date: \_\_\_\_\_ ☐ No

**Availability:**

Sunday: ☐ 9:00am ☐ 11:15am Language: ☐ English ☐ French ☐ Other: \_\_\_\_\_

Preferred grade (Check all that apply): ☐ K-2 ☐ 3-5 ☐ 6-8 ☐ High School

**Special talents:** ☐ Musical (Instrumental or vocal) ☐ Art & Design ☐ Story-telling ☐ Snack prep

☐ Other: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**ANY OTHER INFORMATION YOU WOULD LIKE US TO KNOW ABOUT YOU?**

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