



2021 St. Mark VBS  
ADULT VOLUNTEER Registration  
[18 years & older]

July 12-16 8:45am-12:15pm  
Registration ENDS June 14

VBS will be held in the St. Mark Parish Center.  
At this time, masks & social distancing  
guidelines will be in place.

\_\_\_\_\_  
Last Name First Name

\_\_\_\_\_  
STREET ADDRESS CITY ZIP

Cell #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Children in VBS \_\_\_\_ no \_\_\_\_ yes – Grades: \_\_\_\_\_

Please fill out a separate registration form for children.

Teen helpers in VBS \_\_\_\_ No \_\_\_\_ Yes

Please fill out a separate registration form for teens.

I would like to help with: *(Placement based on request and on where most needed.)*

- |                    |   |  |                      |
|--------------------|---|--|----------------------|
| _____ Nursery      | _____ 1 <sup>st</sup> grade               | _____ 5 <sup>th</sup>  | _____ Art/Crafts     |
| _____ 3 year olds  | _____ 2 <sup>nd</sup> grade               | _____ Snacks   | _____ Games (inside) |
| _____ 4 year olds  | _____ 3 <sup>rd</sup> grade               | _____ Music/Sno Cones (outside)                                  |                      |
| _____ Kindergarten | _____ 4 <sup>th</sup> grade               | _____ Drama/Bible Stories 1 <sup>st</sup> -5 <sup>th</sup> grade |                      |
| _____ Decorations  | _____ Drama/Bible Stories for PreK-Kinder |  |                      |

**I realize all of the above positions require a five day commitment the week of VBS.**  
**I will also attend one training meeting at the end of June if this is my first time to participate**  
**in VBS.**  
**MUST BE SAFE ENVIRONMENT SCREENED/TRAINED TO PARTICIPATE.**

**Signature:** \_\_\_\_\_

T-Shirt Size: Adult S M L XL XXL

**CONTINUED**

**Adult Emergency Contact and Medical Form**

Contact 1: \_\_\_\_\_  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Cell# \_\_\_\_\_

Relationship \_\_\_\_\_

Contact 2: \_\_\_\_\_  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Cell# \_\_\_\_\_

Relationship \_\_\_\_\_

Medical Insurer \_\_\_\_\_  
Policy# \_\_\_\_\_ Group# \_\_\_\_\_  
Medical Conditions \_\_\_\_\_  
Allergies \_\_\_\_\_ Drug Allergies \_\_\_\_\_ Asthma \_\_\_\_\_  
Current Medications \_\_\_\_\_

**WAIVER/AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION**

I, who by law may do so, authorize the administration of emergency medical treatment for the subject of this release form. I understand that all reasonable safety precautions will be taken during this event. I will not hold St. Mark the Evangelist Catholic Church, members of the staff or volunteers responsible for accidental harm or injury that may occur during this event. I understand that, in the event medical intervention is needed, every attempt will be made to contact the person(s) listed on this form immediately.

\_\_\_\_\_  
Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_

**St. Mark Safe Environment Requirements**

All adult volunteers (18 years and older) must have completed a Safe Environment Screening and Training program. In order to volunteer you must meet the following criteria:

-Background Screening Information on file at St. Mark. (If you are from another parish, contact parish and give permission for your screening information to be shared with St. Mark. Attention: Linda Sartor, c/o St. Mark.)

-Annual Training program. (If you are from another parish, contact parish and give permission for your Training information to be shared with St. Mark. Attention: Linda Sartor, c/o St. Mark.)

-Complete Background Screening if this has never been done. Go to St. Mark website "Safe Environment", [www.stmarkplano.org](http://www.stmarkplano.org).

-Interview with St. Mark Staff after completing screening packet.

-Complete Initial Training – contact Linda Sartor at 972-423-5600 or [LSartor@stmarkplano.org](mailto:LSartor@stmarkplano.org)

\*\*If you are a returning volunteer – your only requirement is to update Annual Training.

DELIVER Completed Registration to Parish Office or mail to  
1105 W. 15<sup>th</sup> Street, Plano TX 75075, attn.: VBS