



Volunteer Permission Slip (Volunteers Under Age 18)

I give my permission for _____ to participate as a volunteer at the
PARTICIPANT FULL NAME
2023 Night to Shine, sponsored by the Tim Tebow Foundation at _____
CHURCH
on Friday, February 10, 2023.

Volunteer Information

DOB: _____ Gender: Female: Male:

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Parent / Guardian Phone (Home): _____

Parent / Guardian Phone (Cell): _____

Desired Volunteer Role: _____

Parent Signature: _____ Date: _____

Parent Printed Name: _____

Remit form to: Jennifer Jordan at jennifer@fumcdemopolis.com OR
200 East Decatur Street, Demopolis, AL 36732