

Church Activity

What church or churches have you attended in the past five years?

Church name	Pastor's Name	Years Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

References (other than relatives). Please provide at least two.

Name/Relationship	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Volunteer Work Verification and Release

I recognize that Grabill Missionary Church is relying on the accuracy of the information I provide on the Volunteer Application form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.

I authorize the organization to contact any person or entity listed on the Volunteer Application form, and I further authorize any such person or entity to provide the GMC with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release GMC and any such person or entity listed on the Volunteer Application form from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation.

I understand that GMC has specific policies in regards to both youth and children volunteers and I agree to abide by them and to protect the health and safety of the people assigned to my care or supervision at all times.

Signature: _____ Date: _____

(Please read this Verification and Release carefully before signing.)