PARENT INVOLVEMENT INFORMATION

I will help minister to the children of our church. Please consider this information when placing me for ministry.

NAME_____ Today's Date_____

Email_____

Home Address_____

Phone#_____
work mobile home

My vocation/profession is:_____

My Child(ren)'s Name(s) & Current Ages_____

_____

I have the following interests and abilities that I would be willing to use as I help minister to our children and families. (Please check all that apply.)

teaching	book reader
song leader	librarian
crafts ability	baking
record keeping	nursing
story telling	picture taking
certified CPR instructor	secretarial tasks
counseling	other