

# ADVENTURER

## FL Volunteer Ministry Information Form

MUST BE COMPLETED ANNUALLY (For local club use only)

### *Section I - Personal Information*

Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Volunteer position(s) interested in: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (OPTIONAL)

### *Section II - Educational/Training Information*

Highest level of formal education and area(s) study: \_\_\_\_\_

Certification(s)/license(s) held that may reflect on your skills and abilities in working with children or as a volunteer: \_\_\_\_\_

### *Section III - Shield the Vulnerable (Shield the Vulnerable.org)*

Shield the Vulnerable completed: \_\_\_\_\_ YES \_\_\_\_\_ NO Year: \_\_\_\_\_

Confirmed by church designated person: \_\_\_\_\_

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Volunteer

**Please return completed application to your local Adventurer Club Director  
(Please do not send to Youth Ministries Department)**