VOLUNTEER REQUEST FORM

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| NAME |  |
| ADDRESS |  |
| PHONE |  |
| EMAIL |  |

IN WHICH AREA WOULD YOU LIKE TO PARTICIPATE AT KOINONIA 2018?

\_\_\_ WORK CREW LEADER

\_\_\_ FOOD PREPARATION

\_\_\_ SMALL GROUP LEADER

\_\_\_ OVERNIGHT CHAPERONE

\_\_\_ ADMINISTRATION

PLEASE LIST ANY SPECIAL SKILLS YOU HAVE (CONSTRUCTION, LANDSCAPING, ETC.)

PLEASE FILL OUT THIS FORM AND SEND TO JSCHWENDINGER@CASSCITYMC.ORG