

Name	
Street Address	
City, State, Zip	
E-Mail	
Cell Number	
Date of Birth	

Have you been saved? Yes / No If yes, when and where?

List any ministries or serve teams that you are currently a part of at Milestone:

Why do you want to serve in Milestone Kids?

What experience do you have working with children?

Where would you like to serve: Preschool (Babies – 5yrs) or Elementary (Kinder – 5th)

Which service do you prefer: 5:00pm | 9:00am | 11:00am | 12:30pm

Emergency Contact Information Name & Relationship to You Cell Number

For the parent/guardian - I verify that my student is willing and ready to be involved in a ministry leadership position. I will provide accountability for my student in honoring their commitment to be involved in this position.

Signature: _____

Date:

Youth Volunteer Honor Code- Please read carefully and initial by each statement
I will arrive on time and ready to serve. I will not use my cell phone while volunteering in the classroom. I will interact with the children and follow the instruction of the adult teacher in the
classroom.
I will be a Christ like example at all times, both in how I dress and how I behave. I will attend an age appropriate service each weekend (for example: Fifty6 or Lift). I will not eat in the classroom unless otherwise authorized by ministry lead. I will not pick up & carry any child (for volunteers 15 years of age and under). I will respect and maintain the facility and church resources to the best of my ability. I understand that I am not allowed to discipline a child; if undesirable behavior is happening with a child in the classroom, I will alert the adult teacher in the classroom.

Release of Liability Agreement: To be signed by parent/guardian

By signing this agreement, I understand and agree to the following:

- I am not an employee of Milestone Church for any purpose, and as a volunteer, I am not ٠ entitled to, nor should I expect any present or future compensation or benefits.
- As a volunteer, I understand that I am not covered by Milestone Church workers' compensation program and that I should have my own health insurance in the event I am injured while performing volunteer duties.
- The Church's need for volunteers may change at any time and my assignment may be curtailed or eliminated for any reason. I understand that I may decide at any time to end my volunteer activities with Milestone Church.
- I understand that if I drive a motor vehicle as part of my volunteer duties, I must possess a valid • Texas driver's license, and that the Church is not responsible for any damage to my vehicle.
- I, as the volunteer (or parent/legal guardian), hereby authorize, without my prior approval, • Milestone Church to seek emergency medical treatment for me in case of an accident, injury or illness, and will hold Milestone Church harmless is such an event.
- I, for myself, my heirs, successors or assigns, hereby indemnify, release and hold harmless • Milestone Church, its agents, servants and employees from any and all claims, demands, and causes of action or damages which may happen during my volunteering at Milestone Church. I therefore assume any and all risks attendant to volunteering with Milestone Church.
- Any reports, studies, test, manuals, instructions, photographs, negatives, blue prints, plans, • maps, data system designs, computer code, or any other documents or drawings prepared or in the course of preparation by me, shall be the exclusive property of Milestone Church, and all such materials will be remitted to Milestone Church by me upon the completion, termination or cancellation of my volunteer services. I agree not to use any such materials for any purpose other than the performance of my volunteer service under this agreement.
- I will keep all information confidential, in whatever form, produced, prepared, observed or • received by me as a volunteer to the extent that such information is confidential by law.
- I understand this agreement has no expiration date and remains in effect at all times, while I am volunteering at Milestone Church.

By signing and submitting this application, I (parent/legal guardian) affirm that the facts set forth in it are true and complete. I understand that any false statements, omissions, or other misrepresentations made by me or my child, on this application may result in my dismissal. Also, by signing, I (parent/legal guardian), agree to all guidelines set forth in the application.

Name (Print):

Signature: Date: