



## Volunteer Permission Slip (Ages 14-18)

I give my permission for \_\_\_\_\_ to participate as a volunteer at the  
**PARTICIPANT FULL NAME**  
2019 Night to Shine, sponsored by the Tim Tebow Foundation at \_\_\_\_\_  
**First Baptist Ruston**  
on Friday, February 8, 2019.

### Volunteer Information

Age/DOB: \_\_\_\_\_

Gender: Female:  Male:

Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Parent / Guardian Phone (Home):

\_\_\_\_\_

Parent / Guardian Phone (Cell):

\_\_\_\_\_

Desired Volunteer Role: \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

(Parent / Guardian)