

† Christ the King Roman Catholic Church †

Return to: Mrs. Odette Conroy, 5006 East Wonder Lake Rd., Wonder Lake, IL 60097

Phone: 815-653-2581 Fax: 815-653-9401

VOLUNTEER REGISTRATION FORM

RELIGIOUS EDUCATION SCHOOL YEAR 2020-2021

† † Classes during the school year are on Sunday morning 08:50 - 09:50 am † †

Volunteer's Full Name: _____

Street Address: _____

City/State/Zip _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

Are you registered to Christ the King Parish? Yes ___ No ___ If no, where: _____

EMERGENCY CONTACT PERSON #1 _____ PHONE# _____

EMERGENCY CONTACT PERSON #2 _____ PHONE# _____

MEDICAL INFORMATION SPECIAL CONCERNS ALLERGIES/DISABILITIES/DISORDERS

Please list here

Occupation: _____ Work Hours: _____ Birthdate: _____

Company /School Name : _____ Work Number: _____

Church and Mass time usually attended _____

PLEASE CIRCLE POSITION YOU WOULD LIKE: TEACHER TEACHER'S AIDE STUDENT VOLUNTEER

GRADE PREFERENCE FOR RE (Circle please) P K 1 2 3 4 5 6 7 8 9 10 11 12

HAVE YOU VOLUNTEERED IN RE BEFORE? _____ WHERE? _____ HOW LONG? _____

HAVE YOU TAKEN THE **PROTECTING GOD'S CHILDREN** CLASS ? _____ IF YES, PLEASE PROVIDE A COPY

SACRAMENTS RECEIVED (circle all) BAPTISM RECONCILIATION EUCHARIST CONFIRMATION

EDUCATION / DEGREE:

NAME / CITY / STATE

AREA OF STUDY

GRADUATION YEAR

HIGH SCHOOL : _____

COLLEGE: _____