Volunteer Services ApplicationPrince of Peace Catholic Parish~1110 Dykstra Road~Muskegon Michigan 49445

	First Name	Middle Name		Last Name
Address			Apt/Unit#	
City	State	Zip Code	Phone	
Date of Birth:	Place	of Birth:		Age
Any Previous Add	dress inside or outsi	de of Michigan:		
Address			Apt/Unit#	
City	State	Zip Code	County	
In case of emerge	ency contact:			
Name				
	on. I am a registered :		POP/SMW	Other Parish
Present Employe	ite the name of your <code>j</code>	parisii		
Position				
•	rrent valid driver's	· •	ase identify	
	umber			
			invicted of a misde	emeanor or felony, or are
				scribe the conviction of
	nd identify the state, o		<i>J</i> , 1	
•	wo personal referenc	•		•
		Address Relationsh	in	
			-	
Phone		Rudress Relationsh	in	
			-	authorize and request all
				Peace Catholic Parish any
and all information	and opinions about me	in their possession	and which may law	fully be disclosed. I hereby
				elease such persons and opinions. I also authorize
				of Peace Catholic Parish
any information req	uested concerning any	criminal convictions	on my record, and	all information concerning
	A photocopy of this sign			•
				ployee of Prince of Peace Prince of Peace Catholic
				d by workers compensation
	s a result of my services			-

Signature: _____ Date ____