

Volunteer Signup Sheet for Evansville Area Chrysalis



JOURNEY

Evansville Chrysalis
Attn: Registrar
PO Box 101
Evansville, IN 47701-0101

Email: registrar@evansvillechrysalis.com

Yes, I would like to participate in CHRYSALIS programs and functions in the future!

BY MY TALENTS:

In Music or Entertainment:

Instrument: _____

Singing: _____

Solo: _____

Clowning: _____

Other: _____

In Art: Make Posters: Banners: Other:

BY MY TIME:

As a volunteer on a board committee:

Newsletter: Literature: Prayer Chain:

Registration: Kitchen: Facility Setup:

Snack Agape and/or Meal Agape:

BY MY SERVICE ON THE WEEKEND

72-Hour Prayer Vigil:

Prayers for Speakers:

Serving a Meal:

Serving on a Team:

CONTACT INFORMATION

Name: _____

Address: _____

City, State, Zip code: _____

Phone (Area Code): () Chrysalis #:

Denomination/Local Church: _____

School: _____ Grade: _____ Age: _____

Email Address: _____