

Date:

Volunteer List for Child Protection Compliance Check

Submitted
by:

Ministry / Organization	Name	Phone	Email

Please provide the information below on all persons 18 and over who will be in attendance so we can confirm their child protection compliance status.

	Full Legal Name	Email	Date of Birth	Office Use
sample	Mary Elizabeth Jones	mej@home.com	7/31/1959	
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Please complete and return to childprotection@holyspiritchurch.us