



Junior Helper Application

Children's Ministry Awana

Name: _____

Address: _____

City	State	Zip Code
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Parent/Guardian Phone #: (_____) _____

Birthday (All junior helpers must be twelve years of age or older)

_____/_____/_____
Month Day Year

Statement of Faith

Do you believe that Jesus is the Son of God; that He loves you and came to give His life for you; that he died and rose again?

Yes, I believe this and have made a decision to follow Jesus Christ.

Junior Helper Signature Date

Are you willing to help in the children or youth ministry, showing kindness and care to the children and assisting the adult leaders?

Check box for Yes

Will you commit to at least one week per month that you will *faithfully* show up to help, or if you cannot come on your expected week, that you will call the ministry administrator?

Check box for Yes

Parents: Please Sign Below

I am aware of and approve of my child volunteering regularly in the children or youth ministry. I know that I can contact the coordinator(s) at any time with concerns or questions.

Parent/Guardian Signature Date