



Volunteer Registration Form

Please check off areas in which you would like to volunteer

Evaluator (please list events you are qualified to evaluate)

Official

Tally Room

Security

Set Up/Tear Down

Lunch/Store

Name: _____ Age: _____

Email: _____ Circle One:

Phone: _____ Male Female

Church Name: _____ Church City: _____

Have you passed a church background check within the last 12 months? _____

Send the completed form to:

STXAG- KM Dept., 12106 E. Sam Houston Pkwy N. Houston, TX 77044