

**1<sup>st</sup> Annual**  
Leading With Passion!  
**WORSHIP MUSIC**  
Conference + Festival  
Sept. 15-16, 2006

Print and to fax - (310) 319-9758

**Leading With Passion!**  
**Worship Music Conference + Festival**  
**Festival Volunteer Application and Agreement**

**VOLUNTEER REQUIREMENTS**

Must have an unselfish willingness to serve.

Must be 17 years old or older. If applicant is under 18, then parents must agree to this form.

Must completely fill out the volunteer application.

Must agree to follow all of the LWP! Conference + Festival rules and regulations.

Must have a good attitude.

**SHIFT REQUIREMENTS**

Varying shifts from 2 to 6 hours are needed for either day of the conference/festival. Shift times will vary based on volunteer positions. Check with volunteer coordinator for available times and positions.

I commit myself to volunteer at the LWP Conference/Festival, and to give the Lord the best I can while working in this ministry. I commit to:

Doing my best in all assignments given to me.

Respect all those I come in contact with.

Agree to wear neat, clean, and modest clothing during my shift.

Abide by all the Volunteer and Shift requirements.

Agree to pay for event registration if I attend the conference/festival and do not fulfill my volunteer obligation.

**2006 Volunteer Registration Form**

Many volunteers will be necessary to make this conference + festival run smoothly. If you would like to volunteer, we thank you in advance! Please choose one of these 3 ways to volunteer:

1. FAX a completed Volunteer Registration Form to (310) 319-9758
2. or PRINT a Volunteer Registration Form, fill it out, and mail it in (see address below).

3. Or...CALL the Volunteer Hotline at (310) 393-9287.

Please complete and submit your volunteer form below. Use one form per person.

(Please read carefully and fill out completely.)

\*= Required fields.

Prefix:

First Name: \*

Middle Initial:

Last Name: \*

Suffix:

Church You Attend: \*

Country

Address: \*

City: \*

State:\*

Postal Code: \*

Phone: \*

Secondary Phone:

Date of Birth: \*

Email:

Area of Interest: \*

-Environment/Set-up

-Ticket Sales/Registration/Check-In/Evaluations

-Hospitality

-Plant Management/Cleanup

-Parking

-Food & Beverage

-Other\_\_\_\_\_

Time available Friday From: To:

Time available Saturday From: To:

Please feel to print a Volunteer Registration Form and make copies for friends or family.

NOTE: All volunteers must be at least 17 years old. Thank you for your willingness to serve!

Are you volunteering for the first time? Yes No

Have you volunteered at St. Monica's in the past? Yes No

Would you like to be contacted to volunteer for future local events other than the LWP

Conference/Festival? Yes No

Is there any additional info that would be helpful for us to know?

(Speaker or Artists you don't want to miss, or wish shifts-AM or PM, or specific requests or needs... ONLY a few sentences, please.)

Have you ever been convicted of a felony? No Yes

If yes please explain:

REFERENCE INFORMATION:

(Pastor, youth leader, Sunday school teacher, small group leader, church deacon, church elder or LWP! Coordinator) -(reference information below is required.)

Reference First Name: \*

Reference Last Name: \*

Reference Position: \*

Reference Country

Reference Address: \*

Reference City: \*

Reference State:\*

Reference Postal Code: \*

Reference Phone: \*

Reference Email:

**Print and to fax - (310) 319-9758**