



Saint Ignatius Loyola Parish  
1954 50 2004

# St Ignatius Loyola Parish Youth Ministry Department Volunteer Application

**PLEASE PRINT LEGIBLY OR TYPE. DO NOT LEAVE ANY BLANKS**

First Name	Middle Name	Last Name
Street Address		
City	State	Zip Code
Home Phone	Work Phone	Date of Birth
Email address		

### DRIVER'S LICENSE INFORMATION:

Because you may be driving minors to events, please provide the following information

State	Number	Class	Expiration Date
Insurance Carrier	Policy Number	Amount of Liability Coverage	Amount of Medical Coverage

### REFERENCES:

Please list 2 character references that can attest to your work with young people. Exclude employers and relatives.

Name	Phone Numbers Home:
Address	Work:
City, State, Zip Code	Email address:
Name	Phone Numbers Home:
Address	Work:
City, State, Zip Code	Email address:

**GENERAL INFORMATION** – Please state what talents you would like to share with the Youth Ministry program.

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**SIGNATURE** – My signature affirms that all information on this application is true to the best of my knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_