

Gulf Breeze Retreats, Inc.
Volunteer Participant Application



Name _____ DOB _____

Address _____ City _____ Zip _____

Home phone (____) _____ Cell Phone (____) _____

Email _____

Church or Organization affiliated with: _____

US Citizen YES NO

If NO, please list country to which you have citizenship

Have you ever been convicted or indicted for a crime? YES NO

If YES, please explain:

Valid Driver's License: YES NO

Have you ever served as a volunteer in another organization? YES NO

If YES, please list and give a contact name.

On the back of this sheet tell us why you want to be a volunteer:

If accepted, please note that a charge of \$150 is needed to cover food & insurance costs

Signature _____

Date _____

For review and approval;
MAIL TO:

Gulf Breeze Retreats, Inc.
P.O. Box 2025
Channelview, TX 77530

(Applications received less than 30 days before event may not be accepted)