

REQUEST FOR VOLUNTEER ASSISTANCE

to Partnership and Volunteer Missions, BGCO

Church Name _____ Pastor's Name _____

Church address _____

Contact Person's Name _____ E-mail address _____

Contact Person's Home Phone(____) _____ Cell(____) _____

Type of Volunteer Ministry Assistance Requested

- | | | |
|--|---|--|
| <input type="checkbox"/> Backyard Bible Club | <input type="checkbox"/> Construction | <input type="checkbox"/> Sports Clinics |
| <input type="checkbox"/> Bible Studies | <input type="checkbox"/> Evangelism | <input type="checkbox"/> Vacation Bible School |
| <input type="checkbox"/> Block Party | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Witnessing |
| <input type="checkbox"/> Building Repair | <input type="checkbox"/> Men's Activities | <input type="checkbox"/> Women's Activities |
| <input type="checkbox"/> Community Survey | <input type="checkbox"/> Revival Services | <input type="checkbox"/> Youth Activities |
| <input type="checkbox"/> Prayer Walking | <input type="checkbox"/> Community Survey | |
| <input type="checkbox"/> Other: _____ | | |

Preferred dates for assistance _____

Number of volunteers requested Youth _____ Adults _____ TOTAL _____

Can Church provide? RV Sites (electricity and water)? _____ Cooking facilities? _____

Meals? _____ Sleeping facilities? _____ Showers? _____ Materials for project? _____

Aver. Sunday School Attendance _____ Name of Association _____

Date of request _____

Please return completed form to: Partnership and Volunteer Missions
Baptist General Convention of Oklahoma
3800 N. May Avenue
Oklahoma City, OK 73112

Phone: 405/942-3000 ext. 4339 FAX: 405/516-4941 E-Mail: volmin@bgco.org

Your request will be listed in Volunteer Mission Opportunities in the Baptist Messenger and on the BGCO website.