



Volunteer Permission Slip (under 18)

I give my permission for _____ to participate as a volunteer at
PARTICIPANT FULL NAME

2022 Naples Dance with the Star, hosted by New Hope Ministries and STARability Foundation at the NHM Event Center in Naples on Saturday, February 5, 2022.

Volunteer Information

Age/DOB: _____

Gender: Female Male

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Parent / Guardian Phone (Home): _____

Parent / Guardian Phone (Cell): _____

Desired Volunteer Role: _____

Signed _____ Date _____

(Parent / Guardian)