



**VOLUNTEER PERMISSION SLIP (Volunteers Under Age 18)**

I give my permission for \_\_\_\_\_ to participate as a  
*PARTICIPANT FULL NAME*

volunteer at the 2026 Night to Shine, sponsored by the Tim Tebow Foundation at  
Christ Global Methodist Church on Friday, February 13, 2026.

**Volunteer Information**

DOB: \_\_\_\_\_ Gender: Female: \_\_\_\_ Male: \_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Parent / Guardian Phone (Home): \_\_\_\_\_

Parent / Guardian Phone (Cell): \_\_\_\_\_

Desired Volunteer Role: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Printed Name: \_\_\_\_\_

I acknowledge that the signature above is my parent or guardian's signature. They have viewed this form and consented to my participation in the Night to Shine event.

**Remit form to: Nancy Wolski, Christ Global Methodist Church:  
5200 South 48<sup>th</sup> Street; Greenfield, Wisconsin 53220  
[office@christglobalmethodist.com](mailto:office@christglobalmethodist.com), or upload to online registration form**