

VOLUNTEER APPLICATION THE MEN OF HONOR – THE LADIES OF HONOR MUSKEGON COUNTY MICHIGAN CHAPTER

Thank you for your interest in becoming a volunteer in the Muskegon Men & Ladies of Honor Programs. We are impacting lives for Christ and calling for the Eagle on the inside of young men and young women in Muskegon County. By completing this application, you agree that we can request a background check, using the MSP ICHAT program, by your signature below.

First Name:	Name: Middle Name:		Last Name:			
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Street Address:		City:		Zip Code:	City / State of Birth:	
Date of Birth:	Maiden Name (if applicable):					
Contact Phone - Text enabled ☐ yes ☐ no Email address:						
Contact Phone - Text enabled Li yes Li no		Ellidii duuless.				
Interest Level						
Club Leader Club Assistant	Financ	ce 🔲 Community	y Relations [☐ Camps ☐	Summer / Mentor Programs	
Cida Leader = Cida i idea						
What can you contribute:						
'						
Your Church: Your Pastor:						
Your Church: Y				•		
Miles de very went to become involved in the Drogram?						
Why do you want to become involved in the Program?						
L						
Signature:			Date:			

Applicants that will have direct involvement with the children in this program, acknowledge and agree, that they will be screened by the MI State Police ICHAT background check, as required by the Board of Directors of this organization.