



Pentecostal Assemblies of the World

107th Summer Convention Volunteer Registration

Name _____

Address _____

City _____ State _____ Zip _____

Phone No __ (____) _____ Email _____

CHURCH INFORMATION

Church Name _____

Pastor Name _____

Address _____

City _____ State _____ Zip _____

Phone No __ (____) _____ Email _____

VOLUNTEER OPPORTUNTIES

- Guest Services
- Healthcare Professional
- Transportation
- Music Ministry
- Ushers

Availability

Sun _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____