Event Verification Form

To verify service, please complete this form for each different event and submit with your portfolio.		
Name of Event: _ Grace Bible High School Retreat		
Organization:	Grace Bible Church	
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Type of Service:	Check-in Volunteer	
Describe your service activities:		
Helped with set-up including putting up cones, tables, signage, chairs, wristbands		
	students and parents arriving at drop-off	a sories of
Checked each student off the list to make sure they got checked in and asked a series of CoVid screening questions		
COVIG SCIECIIII	ig questions	
Purpose of Even	nt:	
The purpose of	f this event was to give high school students at Grace Bible Chur	ch a weekend
away with no phones to experience fellowship with other believers, hear sermons about the		
Bible and take place in activities that would help push the students close towards the Lord.		
Date of Service: 03/26/21 Start time: 4:00 pm End time: 7:00pm Total Hours: 3 hours		
Supervisor Information		
Name:	Liz Kilpatrick	
Position:	Retreat Coordinator/ Youth Women's Director at Grace Anderson	
Phone:	757-810-2770	
OR		
Email:		
Signature:	Liz Kilpatrick Date 03/26/21	
Student Information		
Name:	Avery Button	
Signature:	Avery Button	