

COVID -19 Vaccination Information Disclosure

Volunteer Name

Age

Vaccinated

Not vaccinated

Please scan or take a photo of the COVID 19 vaccine certificates and submit it together with the filled application and all other forms included signed. If not vaccinated please explain why.

Signatures of Parents of VACC Camp Volunteer

Parent 1 signature:	Print name:
Parent 2 signature:	Print name:
Volunteer name (minor)	
Signature of Volunteer (if 18 years or older)	

Volunteer signature:

Print name:

Date: