



SPRING 2017 - Volunteer Approval Form

I, _____ (Printed Name) have been approved to be a volunteer/coach.

at _____ (School).

The School has taken the appropriate actions to allow for me to be an approved volunteer. This includes the backgrounds checks that are required by the above listed school.

(Signature)

(Date)

(Signature of School official)

(Date)

Staff Initials _____

Return to:

Center for Women In Transition
Attn: Girls on the Run of Ottawa and Allegan Counties
411 Butternut Dr.
Holland, MI 49424
FAX: (616) 355-9760
EMAIL: staceyv@cwitmi.org