

VBS 2008 Information Sheet

Week of VBS _____ Date of contact _____

Congregation name _____

Contact person _____

Contact phone numbers _____

Church address _____

Church phone _____

Check list:

- _____ Housing lined up for LOMC staff (Sun – Thurs or per your days)
- _____ Meals lined up for LOMC staff (Sun – Fri or per your days)
- _____ Sunday training session set for _____ PM
- _____ Do you want LOMC staff to attend worship Sunday AM? Time _____
- _____ Have volunteers to help with LOMC staff (keeping with ratios)
- _____ The number of campers you estimate are attending: _____
- _____ Have list of campers attending VBS & staff working with LOMC staff
- _____ Finalized Daily schedule
- _____ Mapquest or directions to church

Special VBS needs:

Will there be a closing celebration? _____ Time _____

Will there be any special events or speakers? _____

Will there be any special service projects? _____

Do any campers have any special needs that the LOMC staff needs to know about?
