



SISTERS OF STILLWATERS

VOLUNTEER INFORMATION

Name: _____ **Phone:** _____

Address: _____

Email: _____

Do you have a personal relationship with Jesus Christ? _____

If so, briefly describe how you came to Jesus and what your walk with Him is like. _____

Do you attend church? _____ **If so, where?** _____

Please explain why you would like to volunteer as a Sister of Stillwater. _____

In which area would you like to serve?

Financial Sister Transportation Sister Big Sister

Any other info you would like us to know? _____

