After School Good News Club®
Information Sheet 2026/2027

County/City: _____

SCHOOL INFORMATION

School _____
Principal _____
Secretary _____
Address _____
City, VA Zip _____
Phone _____
Email _____
School hours _____

ADOPTING CHURCH INFORMATION

Church _____
Pastor _____
Address _____
City, Zip _____
Phone _____
Email _____
Children's Pastor: _____
Initial CEF teaching material _____
What CEF series will be taught this year? 1. _____
2. _____ 3. _____

CLUB INFORMATION

Start Date 1st sem. _____ End Date: 1st sem. _____
Start Date 2nd sem. _____ End Date: 2nd sem. _____
Weekday: _____ Room: _____
Time (start and finish) _____/_____

Have you submitted the following to the school:

- ☐ Insurance Verification
- ☐ Building Usage Form

Building Your Team

Choose from the following responsibilities: Team Leader, Admin. Assistant, Bible, Memory Verse, Wonder Time, Missions, Small Group, Song Leader, Review Time, Prayer, Counselor, Table Teacher, Helper, Refreshment Coordinator, Greeter, etc.

Name	Email	Responsibility in club	Badge Needed Yes/No
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			

Total # of volunteers _____ ID verified for each GNC volunteer _____ (signature of team leader)

PLEASE RETURN THIS FORM TO _____ (centralvacef@gmail.com) ASAP – Thank you!