

Volunteer Registration Form 2023-2024

Volunteer Services

**THIS FORM MUST BE COMPLETED & SIGNED EACH SCHOOL YEAR BEFORE YOU CAN VOLUNTEER.
PLEASE COMPLETE ONE FORM PER STUDENT SO YOUR CHILD'S TEACHER WILL HAVE A COPY.**

Name: _____

Date: _____

Address: _____

City, State, Zip: _____

Email Address: _____

Phone Number: _____

If you are a parent, grandparent, or relative of a District 158 student, please complete the following. **You must complete one form per student, but list all children on each form.**

Child's Name (First and Last)	Grade	School Attending	Teacher's Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please indicate at which buildings you are willing to volunteer (check all that apply):

<input type="checkbox"/> Chesak Elementary	<input type="checkbox"/> Conley Elementary	<input type="checkbox"/> Heineman Middle	<input type="checkbox"/> Huntley High
<input type="checkbox"/> Leggee Elementary	<input type="checkbox"/> Mackeben Elementary	<input type="checkbox"/> Marlowe Middle	<input type="checkbox"/> Martin Elementary

When are you available?	<input type="checkbox"/> Mornings	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Evenings
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Are you interested in helping on a weekly basis (grades K-5)? ☐ Yes ☐ No

Do you speak any foreign languages you are willing to use? ☐ Yes ☐ No

Language(s): _____

In accordance with District guidelines, younger siblings cannot accompany you when volunteering during the school day.

Volunteer's Emergency Contact Information

In the event of a medical emergency, do you have any health conditions we should be aware of? ☐ Yes ☐ No

If yes, please list: _____

Person to contact in the event of an emergency:

Name (please print)	Relationship	Phone Number
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1. I acknowledge that participation in the District 158 Volunteer Program is voluntary and I release District 158 from any claim for financial reimbursement now or in the future.
2. I grant permission to District 158 to use photos/videos taken of me in my volunteer assignment for public awareness, education, volunteer recruitment, or volunteer recognition purposes.
3. I have never been convicted of a felony and am not listed as a child sex offender.
4. I further acknowledge that all information is true and there are no restrictions keeping me from volunteering in a school environment.
5. I understand that the children and families in District 158 have a right to privacy and therefore will not discuss any observations or information related to specific children.

Signature of Applicant

Date

**Please complete and return this form to your child's teacher or to
Eileen Delahanty, Volunteer Coordinator, 650 Dr. John Burke Drive, Algonquin, IL 60102**