

# Chaperone Agreement

I would like to volunteer my time and services to participate as

A chaperone during the period from \_\_\_\_\_

to \_\_\_\_\_ for North Hills School District.

I am chaperoning of my own free will. I understand and agree that my volunteer participation as a chaperone is not in any way required by North Hills School District or its Board of Education.

I have not been promised and do not expect to receive any payment, benefits or other compensation for my time and service.

I understand that my participation as a chaperone may be terminated at any time without cause, and that I cannot begin my assignment until all proper documentation is complete and the Director of Human Resources the application.

CHAPERONE'S NAME: \_\_\_\_\_

CHAPERONE'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

AUTHORIZED DISTRICT OFFICIAL'S SIGNATURE: \_\_\_\_\_