

# Application/Chaperone

## North Hills Athletic/Activities Department

Name: \_\_\_\_\_

Address: Street/No \_\_\_\_\_  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_

Phone: Home \_\_\_\_\_  
Work \_\_\_\_\_  
Cell \_\_\_\_\_

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Activity Interested in Chaperoning: \_\_\_\_\_  
Grade Level: \_\_\_\_\_

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Please describe your reason for wanting to be a Chaperone.

Reason:

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**FBI, ACT 34 & 151 CLEARANCES ARE REQUIRED.** Applications/forms are available in the Athletic/Activity Department in the Sr. High School.

**Those wishing to volunteer are not permitted to begin their assignment until they receive written notification from the Director of Human Resources.**