

Rushford-Peterson Volunteer Form:



Name: _____

Phone Number: *(if applicable, cell phone preferred)* _____

Email Address: _____

Volunteer for: *(i.e.: moving rooms, unpacking, playground builds etc.)*

Dates available: _____

Times available: _____

I am interested in the Playground Builds: YES or NO

Please circle the date and time available: *you may circle more than one if you want!*

Thursday, August 10: 8-Noon

Thursday, August 10: 1-5 PM

Friday, August 11: 8-Noon

Friday, August 11: 1-5 PM

Saturday, August 12: 8-Noon

Saturday, August 12: 1-5 PM

(rain date/if needed)

(rain date/if needed)

I understand that I fully know that participation may involve risk of injury. I waive and release the R-P Public Schools and anyone associated with the new school process from liability for any injury, accident or illness obtained in any of the programs, I give permission to provide medical attention as deemed necessary in an emergency for myself or my child. _____ initials *(parent initials if child is under 18)*.

I grant permission for my photo or my child's photo to be taken for R-P Schools publicity. _____ initials *(parent initials if child is under 18)*.

Volunteer Signature: _____

Date: _____

Parent Signature: _____

Date: _____