

VOLUNTEER REGISTRATION FORM (Non Paid Position)

SCHOOL

ACTIVITY(IES)

The Livingstone Range School Division greatly appreciates the services of all of its volunteers. In order to ensure the safety of students, the Board of Trustees believes that all volunteers need to be registered.

Nam	e:			
		Surname	Given Names	
Maili	ng Addre	ess:		
		Address/Box No.	Town	Postal Code
Tele	ohone No	.:		
Do you have children registered in this If yes, please list by name and grade: Name			Yes	No
		Grade: Grade: Grade:	Name	Grade
lf not	, would yo	ou please list at least two references	with whom the school may	check:
Name			Phone No.	
As a 1. 2. 3.	The prine Confider maintain For class		r for all volunteers. e, and the dignity and wo	orth of students and staff shall be
	b) Schoot that that that the second second	ol administration, teaching staff, and he staff of a school operate as a tea unteer can assist greatly in enhan he school team.	support staff have specific m.	
4.	a) If the (or de (i) (ii) (iii) (iv) (v) (v) (v)	nteers outside the classroom: activity is being conducted by a volu- esignate) shall cover the following po- philosophy and playing time (if a to supervision expectations discipline and referral procedures communications with the home an finances and fundraising transportation procedures use of school facilities and equipm	bints during conversation: eam) Id school	on of a teacher, the principal

By signing this volunteer registration sheet, I am agreeing to the conditions outlined.

Signature:

Adopted: April 16, 2002 Revised: March 22, 2013, August 2020 Date: