

# Chaperone Interest Form

The sixth grade team would like to extend an invitation to all parents/guardians that may be interested in chaperoning our Outdoor Education trip. Parents who would like to chaperone MUST sign and return this form with the \$50.00 fee before March 16. We need a minimum of 32 parents to attend in order to make this trip possible. We are able to take more parents than this, but due to a limit of space, may not be able to take every volunteer. Parents who are going to serve as chaperones will be notified and confirmation of availability will be completed by April 13.

We try to design an educational program especially suited to the wonderful surroundings at Summit Lake. All of our activities have two major emphases: outdoor experiences and respect for the environment. One of your primary responsibilities as a parent volunteer will be to assist in the supervision of students throughout the instructional class times and in the cabins. Because we count on parents to serve such a vital role in our program, we ask that parents be prepared to stay for the duration of the trip (three days/two nights).

In order to ensure that everyone involved has the safest, most enjoyable, experience possible, it is very important that everyone has a clear understanding of the program schedule and the school's expectations. For this reason, we require that all chaperones attend a training session. Two training sessions will be offered and chaperones need only attend one. The first session will be held on **May 9** at 7:00 pm in room 106. The second session will be held on **May 17** at 7:00 in room 106.

By returning the bottom of this form, you are expressing an interest in chaperoning the Outdoor Education trip from May 30 to June 1, 2012. Let us take this opportunity in advance to thank you. Without the efforts of parents like you, our students would not have the opportunity to participate in such a beneficial experience.

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**Yes! I am interested in chaperoning the Outdoor Education Field trip to Summit Lake. I understand that in order to chaperone, I will need to attend one of the chaperone training sessions to be held in May.**

**Student's Name** \_\_\_\_\_  
**Parent/Guardian's Name** \_\_\_\_\_  
**Parent/Guardian's Signature** \_\_\_\_\_  
**Parent email** \_\_\_\_\_

**We are always in need of parents that have any medical training and would be willing to assist with Health Room issues. If you possess this background and would be willing to help, please complete the following:**

\_\_\_\_\_ **I have the following medical background:**\_\_\_\_\_ **and am willing to assist with health room issues if needed.**

