**Chaperone Sign Up**

Name

--------------------

Student Name

--------------------

Parent Email Address

__________________________

**Gender of Chaperone (circle)**

Male  Female

Homeroom Teacher

__________________________

Cell Phone Number

__________________________

List any useful skills that could be utilized on the trip (ex. Boy/Girl Scout Leader, nurse, arborist, etc...)______________________________

If you and your child would like to pair up with another chaperone and child, or if your child has a friend they would like to have in their cabin, please list below. We will do our best to accommodate your requests, but can make no guarantees.

**Cabin Mate Preference (optional)**

Student Name ______________________

Chaperone Name ______________________

__________________________

(for teacher use only)

Amount Paid $____________________

Background Check _________

Mandated Reporter Video _________