

Chaperone Sign Up

Name

Gender of Chaperone (circle)

Male Female

Student Name

Homeroom Teacher

Parent Email Address

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 _____