

FIELD TRIP/VOLUNTEER FORM

Name _____ Date: _____

Child's Class _____

**We collect the information below for volunteering in the classroom and/or chaperoning on field trips. This form needs to be signed even if you cannot volunteer*

Your Vehicle's License Plate Number: _____

Name of Car Insurance Carrier: _____ Policy Number: _____

Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)? ___no ___yes

If yes, please explain below:

Signature of Volunteer