

Band and Pageantry
Cypress High School
Booster Parent Volunteers

In order to serve as a volunteer during band and pageantry performances,
you must do the following:

(1) Complete and return to Mr. Quirion the following paperwork.

- Field Trip Excursion Notice and Medical Authorization – Adult (AUHSD)
- Complete the Volunteer/Chaperone Authorization Request
(this form must be completed and signed by the Principal before you can proceed – Mr. Quirion will get it signed and return it to you)

(2) You must be approved as an Anaheim Union High School District Volunteer.

- You must make an appointment to be fingerprinted at the AUHSD office. Contact AUHSD Human Resources at (714) 999-3554 and identify yourself as a volunteer for the Cypress High School Band and Pageantry.
- You will need to bring the signed Authorization Request form with you for fingerprinting.
- If you have completed the process for becoming a volunteer within the last four years, call the above phone number to confirm if you are still cleared as a volunteer.

**Please remember to call early to schedule all the
appointments at your convenience.**

Any Questions? Contact Mr. Quirion:
quirion_j@auhsd.us
(714) 220-4157

Anaheim Union High School District

VOLUNTEER / CHAPERONE AUTHORIZATION REQUEST

DIRECTIONS

Thank you for your interest in serving as a volunteer in the Anaheim Union High School District. AUHSD Volunteers are caring individuals that give freely of their time to make a difference in the lives of students.

Please follow the steps below:

1. Fill out the Volunteer Authorization Request Form.
2. Make an appointment with HR to be fingerprinted: 999-3552.
3. Bring Volunteer Authorization Request Form to your appointment: 501Crescent Way, Anaheim, 92803
4. Your Department of Justice records will be reviewed clearance will be determined by HR staff.
5. You will be recommended for Board Approval by HR and the school will be informed of clearance status.

Volunteer Information

Name:		Phone:	
Address:		E-mail:	
School		Dept.:	
Type of Duties:	Please select one: A) Chaperone B) Clerical Duties C) Classroom Support D) Supervise students E) Other _____		
Volunteer Dates:	From	to	Under the direction of:
Principal Signature:			

FOR HR OFFICE USE ONLY

APPROVED:	YES	NO
SITE INFORMED:	YES	NO
BOT DATE:	_____	

FIELD TRIP EXCURSION NOTICE AND MEDICAL
AUTHORIZATION - ADULT

Name of School: Cypress H.S.
Destination: All Band and Pageantry Performances, 2009-2010
TBA TBA
Departure Date and Time Return Date and Time

As stated in California Education Code Section 35330, I understand that I hold the Anaheim Union High School District its agents and employees harmless from any and all liability or claims, which may arise out of or in connection with my participation in this activity.

In the event of illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical, or dental diagnosis or treatment and hospital care from a licensed physician and/or surgeon as deemed necessary for my safety and welfare. I understand that the resulting expenses will be my responsibility.

Signature: _____

Printed Name: _____

Address: _____ Day Phone: _____
Night Phone: _____

Medical Insurance Carrier Policy No. Address

In the event of illness or accident, please notify:

_____ Day Phone _____
Name Address Night Phone _____

My Doctor's Name: _____ Phone: _____

My Doctor's Address _____

If there are any special medical problems, kindly attach a description of the problem to this sheet. Thank you.