



**Parent/Guardian/Community Volunteer Registration and Affirmation Statement**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

**Emergency Contact Information for the Volunteer**

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

I am the parent/guardian of an LMSD student:  Yes  No

**STUDENT INFORMATION (if applicable)**

Student's Name	Grade	School

I affirm that I have read, understand and agree to comply with each of the following policies. Click on and read each of the individual links below:

- [District Policy 246 Prohibited Harassment by and of Students](#)
- [246 Admin Regs - Prohibited Harassment by and of Students](#)
- [District Policy 806 Child-Student Abuse](#)
- [806 Admin Regs - Child-Student Abuse](#)
- [District Policy 908 Volunteers](#)
- [908 Admin Regs - Volunteers](#)

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_