Copies of IDs (i.e. Driver's license) will NOT be made at the school

Parent Volunteer Form

Online Registration Must Be Completed!!

Parent Name: _____ (only one parent per form)

Volunteer # (Parent, Community, Employee Portal #, or User ID/Username): _____

Student Name: _____ Student I.D. _____ Grade: _____
Student Name: _____ Student I.D. _____ Grade: _____

Magnet Academy (if applicable) - **Circle one**: Forensic Science Global Academy

Circle all that apply: Band Cheer Squad Dance Team Drama Orchestra PTSA
Sports: Basketball, Bowling, Cross Country, Football, Golf, Soccer, Swim Team, Tennis, Track, Volleyball

Parent Cell phone #: _____

Please **ATTACH** a clear copy of your ID (i.e. driver's license) in space below:

For office use only: (PARENTS DO NOT WRITE IN THIS AREA).

Volunteer Level: 1 2 Notes: _____

Verified by: (date and initials) _____ (**Arvida Office Staff only)**