

Volunteer for any of the following:

1) I can teach a class or run an activity at camp.

Name: _____ Activity: _____

*** Mrs. Leeper will coordinate the activities schedule and will be the point of contact at

lleeper@nomeschools.org

2) I can help chaperone. (Circle one: Wednesday, Thursday, or Overnight)

Name: _____ Hours: _____

3) I can cook. (Circle one: cook bacon at home to serve at breakfast or grill hotdogs at camp to serve at lunch) Name: _____

4) I can haul gear in my truck. Name: _____ (Circle one: Wed. or Thursday)

Please provide this information as well:

Sleeping Arrangements

_____ My child will need to be housed in a cabin or wall tent.

_____ My child will sleep in a tent we provide or in another student's tent for which the parent has made arrangements.

Parent Pick-Up / Bus Drop Off

_____ I will pick up my child at the camp on Thursday by 1:30 PM.

_____ I will pick up my child from ACSA on Thursday by 4:05 PM.

_____ My child will ride the regular afterschool bus at 4:05 with his or her camping gear.

Student Name: _____

Parent Signature _____ Date _____

Parent Name Printed _____ Phone # _____

Return this form to school no later than Monday, 8/27/18.