



CHCP MUSEUM PARENT TEAM VOLUNTEER APPLICATION FORM

ADULTS APPLYING FOR THIS PROGRAM MUST BE WILLING TO PASS A BACKGROUND CHECK and be able to make a once-a-month commitment for at least 4 months beginning June 2019 and ending May 2020. Certificate of completion will be given to your student after 20 or more hours of participation.

(PLEASE PRINT)

PARENT'S LAST NAME FIRST MIDDLE

ADDRESS

CITY STATE ZIP

PHONE CELL EMAIL

YOUR SON / DAUGHTER'S NAME AGE

YOUR STUDENT'S SCHOOL GRADE GPA

LANGUAGES YOU SPEAK (OPTIONAL)

PARENT VOLUNTEER SIGNATURE DATE

STUDENT VOLUNTEER SIGNATURE DATE

Parent Team Volunteer :
I am available to participate with my Son/Daughter in the Student Docent Program from:
Date (Month and Year) to Date (Month and Year)

Waiver of Liability (Parent/Guardian must sign)
I understand that by signing this waiver, that while I and/or my son/daughter participate in the Chinese Historical and Cultural Project (CHCP) activities, I understand that I will assume the risk of accident or injuries sustained from whatever cause in connection therewith. I release History San Jose (HSJ), CHCP and its board members and staff from any liability involving any such accident or injury.

PARENT/GUARDIAN VOLUNTEER SIGNATURE DATE

Email completed form to CHCP Director Brenda Wong (brenda.wong@chcp.org).

Chinese Historical and Cultural Project (CHCP)
P.O. Box 5366, San Jose, CA 95150-5366