



**Bilingual Christian Academy & Technology**  
*Lake Wales Campus*

**School Volunteer / Chaperon Registration**

2021.SS.008  
BCAT  
Lake Wales, FL

REV: 06/15/2024

**SCHOOL VOLUNTEER REGISTRATION**

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

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ Gender: Female / Male

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

City: \_\_\_\_\_, Florida, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Employer: \_\_\_\_\_

Employer's Phone: \_\_\_\_\_

Who should we contact in case of an emergency? (*¿A quién contactamos en caso de Emergencia?*)

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**STUDENTS INFORMATION**

Student's Name	DOB	Grade	School Attending

It is understood that I am offering my services to the school without compensation and without any rights to health claim or medical or disability benefits in case of accident and/or injury.

*(Entiendo que estoy ofreciendo mis servicios voluntarios sin compensación y sin ningún derecho a reclamar beneficios médicos o incapacidad en caso de accidente y/o herida.)*

\*A local background check from the Department of Law Enforcement is required for all volunteers and must be submitted with this application with a copy of your FL ID.

*\*Se requiere una verificación de antecedentes del Departamento de Policía local para todos los voluntarios y debe ser presentada con esta solicitud con una copia de tu FL ID.*

\_\_\_\_\_  
Applicant's Signature  
*(Firma del Apicante)*

\_\_\_\_\_  
Date  
*(Fecha)*