



**Bilingual Christian Academy &
Technology of Lake Wales**
School Volunteer / Chaperon Information

2021.SS.008
BCAT
Lake Wales, FL
REV: 01/13/2021

Student's Name: _____ **Grade:** _____
(Nombre del Estudiante) *(Grado Académico)*

Parent / Guardian's Name: _____
(Nombre del Padre o Tutor Legal)

DOB: _____ **SSN:** _____

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:** _____

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.*

Parent / Guardian's Signature
(Firma del Padre o Tutor Legal)

Date
(Fecha)