



Navarro Middle School

Volunteer Pledge

YES! I would love to volunteer at Navarro. I have checked the area/s where I would like to volunteer. Please return form to **JEAN SPENCER** at Navarro. You must go on the district website and fill out a background check form **EVERY** year to volunteer [forward the clearance email to jspencer@lcisd.org] before you are able to volunteer at school.

_____ LPAC

_____ Field Trips	_____ Parents on Patrol
_____ Work Room	_____ Library
_____ Fund Raiser Distribution	_____ Dances [during school]
_____ Site-Based Decision Making Team	_____ Career Day speaker

Student's Name _____

Check one: ___ parent ___ grandparent ___ guardian ___ other.

YOUR Name _____

Mailing Address: street, apt. number _____

city _____ zip code _____

*****Email address** _____

Phone Numbers: home _____ cell _____

Emergency Contact Name **[FOR YOU]** _____

Emergency Contact Phone Number **[FOR YOU]** _____

Day/s and time/s available (circle all that apply):

M T W TH F _____ AM _____ PM

Comments/Suggestions: (use back of form for more information)
