



Middle School
Enrollment Form for previously approved District Volunteers

Please complete or update your information!

Your Name _____ Preferred Phone _____

Email address: _____

Middle School Student's name(s) and Community:

I have an interest in volunteering for: (check all that apply)

- Social events chaperone** (*Friday evenings*)
- Special event ticket/other sales** (*collecting payments during lunchtimes*)
- Library Book Fair** (*daytime; two-hour time slots between 8 and 2:30*)
- Classroom assistance** (*as requested by teachers*)
- Clerical assistance and projects** (*as needed*)
- Special events** (*such as daytime track meets, afterschool community events*)
- Field Trip Chaperone** (*daytime or evening*)

Previous Gates Chili School District or other volunteer experience _____

Return to the Middle School Main Office or:

Paula LaManna, Coordinator of Volunteers
Gates Chili School District
2 Spartan Way
Rochester, NY 14624

or by scanning and email to: *Paula_LaManna@gateschili.org*