



Huntington Beach High School

Volunteer In Public Schools/ Emergency Information

Please complete the VIPS form and return to Teri Moore Tmoore@hbuhsd.edu before you volunteer.

Volunteer Name _____

Address/City/Zip _____

Email address _____ Phone _____

Student Name _____ Grade _____

I would like to help HBHS students in the following area please circle:

Daytime Volunteer PTSA HBHS Foundation Snack Bar Activities/Events	APA _____ Booster _____ GRAD NITE _____ Goodies/Supplies _____
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In Case Of Emergency, Please Notify:

1.)Name _____	Phone _____
2.)Name _____	Phone _____
3.)Name _____	Phone _____

Do you have any physical condition that would be significant in a medical emergency?

Please list all medications taken regularly: _____

Do you give your permission to be transported by ambulance, if necessary?
 Yes, ___ No ___

WAIVER REGARDING EMERGENCY INFORMATION

I hereby waive HBHS & HBUHSD from any responsibility for circumstances arising as a result of incomplete information. I hereby swear that I have never been convicted of a felony or misdemeanor:

Signature _____ Date _____

Please return to HBHS Community Resource Coordinator, Teri Moore 714-536-2514 x51601 tmoore@hbuhsd.edu. For Office Use:

Megan's Law - TB Assessment - Fingerprint