

ANDERSON CREEK ACADEMY

Volunteer Agreement

Please sign the following agreement and return to the volunteer coordinator.

My signature below indicates that I have received, read and understand the information and expectations outlined in the Anderson Creek Academy Volunteer Handbook. I understand that I must follow the guidelines as written and failure to do so may result in my inability to serve as a school volunteer. I also acknowledge that I have read and understand the Family Educational Right to Privacy Act and agree to abide by it.

Name of Volunteer: _____
(Please Print)

Volunteer's Signature: _____ Date: _____

Name of Volunteer: _____
(Please Print)

Volunteer's Signature: _____ Date: _____



Students who attend ACA on whose behalf you are volunteering. Please Print.

Name of Student: _____ Grade: _____

Name of Student: _____ Grade: _____

Name of Student: _____ Grade: _____