## VOLUNTEER REGISTRATION FORM Richmond R-XVI School District

Volunteers are required to provide the District with a complete Volunteer Registration Form.

First Name Middle Last Name	1 1	V		
Date of Birth	A			
Current Home Address	City	State	Zip code	1 4
Contact Phone Number				
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Email Address				
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I have students in the District: Y	es or NO			
Student Name	Grade	_	Building	-
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Student Name	Grade		Building	
Student Name	Grade		Duilding	- /
Student Name	Grade		Building	N .
Student Name	Grade		Building	
Please list programs or activities	s vou are volunteering	o for:		
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	<del></del>			
Volunteer Signature	Date Administration		gnature	Date