



Non-School Sponsored Civic and Service Learning Outside Form

School Site: _____

Student Information (The Who):

Name: _____ ID#: _____ Grade: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____ Email: _____

Event Information (The What & Where):

Name of Event: _____

Name of Organization: _____

501c EIN/TAX ID (if applicable): _____

Date of Event: _____

The undersigned acknowledge and agree to the following:

1. Participants are to abide by all rules and regulations governing conduct during his/her civic and service learning project. Any violation of these rules and regulations may result in that individual being sent home at the expense of his/her parent/guardian.
2. I take full responsibility for my student during his/her civic and service learning project, and recognize that the school, the counselors and the administrators are collecting this document to assign hours served not give permission for said project.
3. The selection of this civic and service learning project was our choice and was not mandated or assigned by the district.
4. Unless otherwise mandated by law, the district is not providing transportation to, from or during the civic and service learning project. Transportation is the responsibility of the student.
5. Unless the program is under the direct supervision of the district, the district has no responsibility for supervising the program.
6. In order to participate in these activities, my son/daughter and I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activities and my son/daughter must be covered by group/private medical insurance.
7. I agree to defend, indemnify, and hold harmless the Anaheim Union High School District, its Board, its employees, officers, agents or volunteers for any injury/illness suffered by my son/daughter which is relative to and/or associated with preparing for and/or participating in this activity.

Signature of Parent/Guardian: _____ **Signature of Student:** _____ **Date:** _____

Total Number of Hours Completed: _____

Organization Contact Name: _____ Signature: _____ Date: _____

Organization Contact Email: _____ Organization Contact Phone #: _____