



## Key Club Member Registration Form

Name (Last, First):			
Home Address:			
Home Phone:		Cell Phone:	
Grade:		Email:	
Key Club of:		First Time at DCLC?    Y    N	
Name of Chaperone:		Chaperone Cell #:	
Please indicate any assistance or special considerations you may need in terms of medication, etc.			
<p><b>Chaperone:</b> Please read the following statement and sign this form.</p> <p><i>I do certify that I am the chaperone for the person named above. I hereby take full responsibility for the conduct of this member of Key Club during DCLC.</i></p> <p>Signed: _____ Date: _____</p>			
<p><b>Student:</b> Please read the following statement and then sign this form.</p> <p><i>I have read and understand the Key Club Code of Conduct and I hereby commit to abide by its provisions.</i></p> <p>Signed: _____ Date: _____</p>			
<p><b>Parent:</b> Please read the following statement and then sign this form.</p> <p><i>I have read the Key Club Code of Conduct and understand that my child will abide by its provisions.</i></p> <p>Signed: _____ Date: _____</p>			