

Welcome Helix Key Clubbers!

What you have in your hands is the application to become one of the **250,000+** Key Clubbers around the world! Helix Key Club presents you the honor of being a member of the largest community service organization on campus, representing Division 31 Robots, one of the many divisions of Call-Nev-Ha Key Club International District. This is the perfect opportunity to meet other peers from all around California, Nevada, and Hawaii while contributing to the community you live in, changing lives of the less fortunate and proudly displaying your accomplishments! Key Club provides opportunities to unite a passionate group of High School students who ultimately have one goal – to make the world a better place.

Please fill out the following papers attached and return them to me or any board member. The Key Club membership is **12 dollars**. The majority of dues go to Key Club International, and this provides members with member resources such as a shiny member pin, a membership card, and a subscription to Key Noter! In addition, dues help make district events such as Fall Rally at Magic Mountain and District Convention in Santa Clara possible! So remember you **must** pay your dues in order to enjoy the benefits of being a Key Club member! You will pay dues at the finance office, next to the Dawg House. Remember to keep your receipt! Please turn in paperwork and pay your dues to officially be a Key Club member. Please have everything done by November 1st. Until then, my board members and I are great resources if you have and questions or comments. I look forward to an amazing year with you guys!

-Dillon Cao

Key Club President 11-12

Helix Charter High School Key Club

In order to participate in Key Club events this form must be filled out, signed by a parent and returned to Mrs. Triba at the next meeting.

The purpose of this form is to inform parents and guardians about the supervision of Key Club events throughout the year. Key Club participates in a variety of off-campus activities, including things such as charity events and walks. These events may be supervised by Kiwanis members and/or community members.

Students will be responsible for their own transportation to and from these events. Also, at these off-campus functions Key Club students will not be supervised by Helix High School staff. These events may be supervised by Kiwanis members and/or community members. If you feel that your student requires supervision, please accompany them to these events.

By signing this permission slip you are allowing your student to participate in various community events that our Key Club students attend annually. If this form is not returned at the next Key Club meeting the student may not participate in any further off-campus events.

Student Name: _____ Student ID# _____

Parent Name: _____ Date: _____

I acknowledge that my student, _____, will be participating in various community events with other Key Club members from Helix Charter High School. I am aware that transportation will not be provided by the school and I am aware that Helix Charter High School does not provide supervision at these off-campus events.

Parent Signature: _____

**Helix Charter High District
Excursion Permit**

10#

Student: _____
 School: Helix Charter HS
 Grade: _____
 Class Activity: Key Club Events
 Mode of Transp.: Self
 Depart from: Helix / Home Time: Varies Date: Aug 4, 2009
 Return to: Helix / Home Time: Varies Date: Oct 31, 2010
 Supervising Faculty: (See Additional Permission Slip)
 Dear Parent(s)/Legal Guardian: Key Club Advisor - Amy Triba (619) 644-1940 x314

The faculty members in charge and school administration will take all reasonable precautions in planning and carrying out this trip to ensure the safety and welfare of your child. Students are expected to conduct themselves in a manner that reflects pride in themselves, their school and in the Helix Charter High School District. The District policies and regulations, which govern student conduct, shall be the guideline for student behavior during this trip. These policies and regulations, among other things, prohibit:

1. Use or possession of alcoholic beverages, narcotics or dangerous drugs, or dangerous weapons.
2. Smoking by students on campus or in other areas in which school activities are taking place.

Students who violate existing policies and regulations are subject to disciplinary action upon the return from the trip. Students apprehended for violations of law will be left in custody of local authorities. Parents will be responsible for student's release.

All volunteer adult drivers are required to file with the school a signed verification that their insurance meets the minimum requirements in conformance with District policy.

All persons making the excursion shall be deemed to have waived all claims against Helix Charter High School District, the above named school, their officials, employees and agents, from and against any and all liability for property damage, injury, accident, illness or death occurring during or by reason of the excursion. Commercial, low cost, student insurance is available through the school finance office.

WAIVER

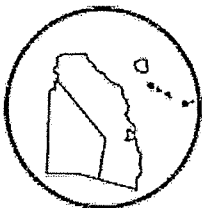
The student named above has my permission to take part in the above listed school sponsored class activity on the date indicated. I hereby agree, for myself and the above named student, to indemnify and hold harmless the Helix Charter High School District, the above named school, their officials, employees and agents, from and against any and all liability for property damage, injury, accident, illness or death, to person or property in connection with participation in this class activity.

In the event of accident or illness, the school district/volunteer has my permission to render whatever emergency treatment may be deemed necessary for the above student.

Dated: _____
 Signature of Parent or Legal Guardian _____
 Relationship to Student _____
 Emergency Telephone Number _____
 Forms/Excursion Permit

**CALIFORNIA DISTRICT
KEY CLUB INTERNATIONAL**

**Consent for Attendance
and Medical Authorization**



I am a parent or legal guardian of _____ (my child) and give my consent as follows:

1. For my child to attend Key Club events, which are official functions of the California-Nevada-Hawaii District of Key Club International.

2. For any responsible adult who is acting as a chaperone for my child is authorized to obtain any medical and/or dental treatment for my child which the chaperone in their sole discretion may deem necessary. Any medical doctor, dentist, hospital or other treatment facility is requested to cooperate with the chaperone if they request medical or dental treatment for my child. This medical authorization shall include but shall not necessarily be limited to hospitalization, out patient treatment, the giving of medications, injections, blood transfusions, surgery, x-rays, physical therapy or any other forms of medical or dental treatment whether or not specifically listed herein; provided however, that the adult consenting or authorizing such treatment shall have first attempted to contact me at the telephone number set forth below unless the need for treatment results from emergency situations that require immediate treatment such that a prior attempt to contact me is not practical or reasonable.

My child has the following known allergies or medical conditions: (none) _____

My child is taking the following medications: (none) _____

Medical Insurance Policy Carrier _____

Policy Number _____

Dated: _____ (Parent) (Legal guardian)

_____ (Emergency phone number)

Key Club Membership Application 2011-2012

Division # _____ School Name _____

Name _____
Last First

Address _____
City Zip Code

Home Phone (____) _____
Cell Phone (____) _____

E-Mail Address _____

AIM or MSN Screen Name (circle one) _____

Preferred Method of Contact → Home Phone Cell Phone E-mail AIM MSN

Gender → Male Female Grade → 9 10 11 12

How many Years have you been in Key Club? → 0 1 2 3 4

Are you able to drive? → Yes No

If no, will you be able to acquire transportation by parents, friend, etc? → Yes No
(Carpooling might be available within your club. Please refer to an officer of the club.)

Do you plan on attending Fall Rally at Six Flags? → Yes No

Do you plan on attending District Convention in Santa Clara? → Yes No

Will you be able to attend monthly Division Council Meetings (DCM)? → Yes No

QUESTIONARE

What are you most looking forward to this year in Key Club?

If you were given the opportunity to create an event that Key Club could attend, what would it be?

How many HOURS do you plan or need to complete this year?



Please feel free to contact the club president if you would like to volunteer to supervise any events or have any questions. We may need parents to chaperone for all-day/overnight events: Fall Rally (Six Flags Magic Mountain) and the 2016 CALIFORNIA District Convention (Santa Clara, CA). Also, as a community service organization, feel free to provide the club with events of your knowledge that would use the assistance of Key Club. One of our objects is to serve our home, school and community. We would love for you to participate in helping out the community alongside your child.

Parents:

Parent/Guardian Signature

Date Signed

It is necessary that the parent and/or guardian specifically authorize that their child is permitted to be included in these activities and transportation is provided by parent or parent-approved transportation. The school will not provide supervision for these events. It is important that you understand that the school cannot assume any financial or legal liability in case of an injury or accident.

AUTHORIZATION FOR STUDENT PARTICIPATION

Student Signature

Date Signed

I, _____, the undersigned, recognize my commitment to Key Club. I will remain an active participant of Key Club by attending weekly meetings and participating in community service projects on a regular basis. As a member of this non-profit community service organization, I agree to complete my about stated goal of _____ hours and aim to reach the average yearly goal of 50 hours.

MEMBERSHIP COMMITMENT

Room	Teacher	Course	Year
			1
			2
			3
			4
			5
			6
			7
			8
			9
			10

CLASS SCHEDULE