

## HCSA Member Contract 2024-2025

# HCSA

I have read and understand the requirements and guidelines of this organization and hereby commit to fulfilling them. I further agree to be completely honest about the submission of my service hours and to represent Reno High School with pride, respect, and integrity while volunteering in the community and beyond.

Print Student Name: \_\_\_\_\_ Year: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Cell Phone Number: \_\_\_\_\_

Student's Email Address: \_\_\_\_\_

I hereby agree to support my student in his/her pursuit of a community service letter (all grades) and a scholarship for community service (seniors only).

Print Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Cell Phone Number: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Please sign and return this contract via email to  
RenoHCSA@gmail.com