



# Chaperone Form

Organization Name \_\_\_\_\_  
Event \_\_\_\_\_  
Date(s) \_\_\_\_\_  
Location \_\_\_\_\_

Chaperones:

_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
Club Advisor or Lead Faculty/Staff Chaperone      Date

\_\_\_\_\_  
Department Supervisor      Date

\_\_\_\_\_  
Director of Student Life Approval      Date

\_\_\_\_\_  
Dean of Student Affairs Approval      Date