RCHS Kids Community Service Application

Last Name_____ First Name_____

Address_____City_____State_____Zip_____

Home Telephone ( )_____Cell_____Email_____

Your age____Your birthday_____Your grade____ Your Pet(s)_____

Your Parent/guardian_____Daytime telephone ( )_____

Where did you hear about the RCHS KCS Program?_____

What are your community service requirements? _____

What is the name of your school or organization?_____

Write a brief essay explaining why you want to participate in the KCS program:

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Are you willing to participate in additional KCS special events? Yes____ No_____

For office use:
Date received_____ Level I or II Start date_____

RANCHO COASTAL
HUMANE SOCIETY