

# Fresh Meadow Chinese Language Center

## Employee Information

(Volunteer) (Substitute)

Your cell phone number: \_\_\_\_\_

Emergency contact : Name \_\_\_\_\_ Phone: \_\_\_\_\_

**Photograph Consent : I hereby consent to the participation in the use and the taking photographs and videos by Fresh Meadow Chinese School for non-porfit purposes.**

Signature X: \_\_\_\_\_

1	Your first name and middle initial	Last name	2	Your social security number
Home address (number and street or rural route)			Date of Birth: MM/DD/YYYY	
City or town, state, and ZIP code				