



Please fill in all information and return the signed form to your child's teacher. Your child's teacher will contact you regarding parent volunteer opportunities.

Parent Name _____ Phone _____

Child's Name _____ E-mail _____

_____ I would like to be a room parent.

_____ I am willing to volunteer in other areas of the school.

_____ I would like to volunteer periodically throughout the school year.

Day(s) of the week I am available (please circle): M T W TH F

Time(s) available: _____

_____ I would like to volunteer in the Computer Lab.

_____ I would like to volunteer in the Library.

_____ No thank you. Maybe at another time.

Hobbies/special areas of interest you might have:

Comments:

Signature: _____ Date: _____