

Volunteer Information Form (2015-2016)

*RMS PTSA compiles a database of volunteer names. You DO NOT need to be a PTSA member to volunteer.
Please print clearly, complete only ONE form per family, and return to a homeroom teacher ASAP.*

Parent(s)/Guardian(s) name: _____

Home phone: _____ Cell phone: _____ Email: _____

Student: _____ Grade: 5 6 7 8 Homeroom _____

Student: _____ Grade: 5 6 7 8 Homeroom _____

Student: _____ Grade: 5 6 7 8 Homeroom _____

I/We would like to be contacted for volunteer work in the following areas (check all that apply):

Volunteer A: _____

First name (use column A below)

Volunteer B: _____

First name (use column B below)

Area:

A B

- Anything
- Author Visits/Book Fair
- Box Tops Prep
- Building & Grounds
- Fundraising or Rewards
- Hospitality / Food
- Reflections Art Program
- Teacher Request Committee

Time:

A B

- Anytime
- Mornings
- Afternoons
- Evenings

Comments:

