



# Parent Contact/Volunteer Form

Student Name(s): \_\_\_\_\_ Grade(s): \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Cell or Work No.: \_\_\_\_\_

Occupation: \_\_\_\_\_

Email address: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Cell or Work No.: \_\_\_\_\_

Occupation: \_\_\_\_\_

Email address: \_\_\_\_\_

Areas of Interest: Please check activities that interest you. Our goal is to have all families actively involved in some area of the band. Without your help, we cannot run an effective program for our students.

- |       |   |       |                            |
|-------|---|-------|----------------------------|
| _____ | Special Events  | _____ | Fundraising                |
| _____ | Chaperone   | _____ | Car Washes                 |
| _____ | Parade of Tables  | _____ | Fruit Sale                 |
| _____ | Pit Crew  | _____ | Practice Field Maintenance |
| _____ | Band Camp   | _____ | Prepare Concert Programs   |
| _____ | Spring Awards Banquet   | _____ | Marching Uniforms          |
| _____ | Website   | _____ | Concert dress/tuxedos      |
| _____ | Corporate Sponsorships  | _____ | Roundtable                 |
| _____ | Bus Drivers   | _____ | Equipment Truck driver     |
| _____ | Other (describe any skills you have that can be used to help) |       |                            |

\_\_\_\_\_  
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