

Volunteer Questionnaire / Interest Form

Name: _____ Phone: _____

Address: _____ City: _____

E-Mail Address: _____

Do you have a child in this school? Yes No

Child's Name/Grade _____

Child's Name/Grade _____

Child's Name/Grade _____

Child's Name/Grade _____

Times Available to Volunteer (please specify days, hours or other considerations):


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Please check the activities where you would like to volunteer. (Note: we will make every effort to match you to the activity you choose. Volunteers will be placed where and as needed.)

\_\_\_\_\_ Assemblies

\_\_\_\_\_ Book Fair

\_\_\_\_\_ Box Tops / Labels

\_\_\_\_\_ Charities

\_\_\_\_\_ Classroom Helper

\_\_\_\_\_ Community Donations

\_\_\_\_\_ Community Resources

\_\_\_\_\_ Field Trips

\_\_\_\_\_ Fundraisers

\_\_\_\_\_ Hospitality

\_\_\_\_\_ Library

\_\_\_\_\_ Membership

\_\_\_\_\_ Office Assistance

\_\_\_\_\_ Scrapbook / Archives

\_\_\_\_\_ Sixth Grade

\_\_\_\_\_ Socials

\_\_\_\_\_ Special Days

\_\_\_\_\_ Sports - Basketball - Boys

\_\_\_\_\_ Sports - Basketball - Girls

\_\_\_\_\_ Sports - Cheerleading

\_\_\_\_\_ Sports - Flag Football

\_\_\_\_\_ Sports - Football

\_\_\_\_\_ Sports - Instructional Basketball

\_\_\_\_\_ Other: \_\_\_\_\_