



Volunteer Sign-up Sheet

Contact Information

 PARENT/GUARDIAN NAME RELATIONSHIP

 ADDRESS

 PHONE NUMBER EMAIL

 CHILD'S NAME GRADE CHILD'S NAME GRADE

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Volunteer Interests & Availability

1. **Do You Have a Unique Talent or Skill** that you'd like to share or access to a unique resource that might be a great fit for the school (like company matching gift program, gardening tools/equip., etc.)?

2. **I'd Be Interested In Helping With** the following activities and/or committees. (Please check all that apply).

- | | | | | |
|--|--|---|---|--|
| <input type="checkbox"/> Lunch Duty(see below) | <input type="checkbox"/> Homeroom Parent | <input type="checkbox"/> Golf Outing | <input type="checkbox"/> Santa Shoppe | <input type="checkbox"/> Laps for Learning |
| <input type="checkbox"/> Facilities Assistant | <input type="checkbox"/> Gardening Club | <input type="checkbox"/> Casino Night | <input type="checkbox"/> Box Tops | <input type="checkbox"/> Uniform Exchange |
| <input type="checkbox"/> Children's Programs | <input type="checkbox"/> Coaching | <input type="checkbox"/> Substitute Teacher | <input type="checkbox"/> Scrip | <input type="checkbox"/> Field Day |
| <input type="checkbox"/> Kitchen Help | <input type="checkbox"/> Halloween Tailgate | <input type="checkbox"/> Christmas Bazaar | <input type="checkbox"/> Teacher Luncheon | <input type="checkbox"/> Book Fair |
| <input type="checkbox"/> Faith Development | <input type="checkbox"/> Athletic Dept Snack Stand Helpers | <input type="checkbox"/> Dare to Dash 5K | <input type="checkbox"/> Other _____ | |

3. **The Days and Times Best For Me Are:** (Please check all that apply)

- | | | |
|---|------------------------------------|---|
| <input type="checkbox"/> The School Day | <input type="checkbox"/> At School | <input type="checkbox"/> Weekday Evenings |
| <input type="checkbox"/> After School | <input type="checkbox"/> From Home | <input type="checkbox"/> Weekends |

Lunch Duty Only (select day and frequency):

- | | | | | |
|---------------------------------|------------------------------------|------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday | <input type="checkbox"/> Friday |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Bi-Weekly | <input type="checkbox"/> Monthly | <input type="checkbox"/> Substitute | <input type="checkbox"/> Substitute Only |

Have Questions?

Please call or email if we can be of any help or if you have any of your own ideas for getting involved.
 Contact: Nadine Marks Dempsey at (h) 486-5336 (c) 302-528-5743 or email Nadine@usairads.com