

**ALBERTUS MAGNUS HIGH SCHOOL
2011/2012 SCHOOL YEAR
PARENT VOLUNTEER SIGN-UP**

Parent(s) Name(s): _____

Child's Name & Year: _____

Address: _____

Telephone: _____ (day): _____

_____ (evening) _____

_____ (cell) _____

Please check which number you prefer.

Email: _____

Please check the boxes next to the activities for which you are interested in volunteering
(note that there is a separate column of boxes for each parent):

	Mother	Father	Chairperson
Golf Classic	<input type="checkbox"/>	<input type="checkbox"/>	X
Auction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent Ambassadors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitality Committee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent Homeroom Rep (contact person for Parents' Club activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homecoming Weekend	<input type="checkbox"/>	<input type="checkbox"/>	X
Albertus Friends of the Performing Arts (AFPA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basketball Tournaments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Falcon Corner (2 hour shifts, Mon-Fri. 11:00- 1:00)	<input type="checkbox"/>	<input type="checkbox"/>	X

Special Interests: _____

FALCONPARENTSCLUB@ALBERTUSMAGNUS.NET