

LRS PTA
Volunteer Form
2018-2019



Name: _____

Phone #: _____

Email: _____

Please check all that apply to your willingness to serve!

During School Hours

- | | |
|---|---|
| <input type="checkbox"/> Hearing/Vision Screening | <input type="checkbox"/> Water Days |
| <input type="checkbox"/> Honor Roll Activities | <input type="checkbox"/> Book Fair |
| <input type="checkbox"/> North Pole at Lee Road | <input type="checkbox"/> Teacher Appreciation |
| <input type="checkbox"/> Father/Daughter(Set Up) | <input type="checkbox"/> Dippin' Dots |

After School Hours

- | | |
|---|--|
| <input type="checkbox"/> Cake Bingo | <input type="checkbox"/> Mother/Son Basketball |
| <input type="checkbox"/> Open House Dinners | |

I CAN HELP ALL YEAR LONG!!!