

STUDENT/PARENT INFORMATION SHEET

Please give this completed form to your E.O. teacher ASAP.

Student's Name: _____

Address: _____

City: _____ **Zip code:** _____ **Home Phone:** _____

First Contact: _____ **Relationship:** _____

Email Address (if available): _____

Occupation: _____ **Place of Employment:** _____

Business Phone: _____ **Work Hours:** _____

Best time to reach you? _____ **May we contact you at work?** Yes No

Mailing Address & Home Phone (if different from above):

Second Contact: _____ **Relationship:** _____

Email Address (if available): _____

Occupation: _____ **Place of Employment:** _____

Business Phone: _____ **Work Hours:** _____

Best time to reach you? _____ **May we contact you at work?** Yes No

Mailing Address & Home Phone (if different from above):

First Contact Signature: _____

Second Contact Signature: _____

PLEASE SEE OTHER SIDE



Volunteer Sheet

During the school year we plan to have a number of special activities during which we could use some volunteer support. Please check any/all of the items listed below if you are interested in assisting us. We will contact volunteers as needed when we get closer to the events.

_____ Help with Frontier Day (first Friday in May)

_____ Help with special events (sundae party, team treats, etc...)

_____ Team treats (December)

_____ Frontier Day (May)

_____ Sundae Party (May)

_____ Provide snacks for special rewards

_____ Provide prizes for end-of-year auction

(Examples: books, DVDs, gift cards, candy or snack items)