

# USD #377 - ATCHISON COUNTY COMMUNITY ELEMENTARY SCHOOL

## PTO VOLUNTEER INFORMATION FORM

### Parent/Guardian Information:

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Student Information:

Name: \_\_\_\_\_ Teacher: \_\_\_\_\_ (Circle All That Apply)

Willing to help with classroom parties? Halloween Christmas Valentine Easter

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Willing to help with classroom parties? Halloween Christmas Valentine Easter

Willing to be head room parent? Teacher \_\_\_\_\_

Willing to help with "Back to School Night?" Yes No

Willing to help with fund raisers? Yes No

Willing to help with the Book Fair? Yes No



Willing to help with the meals for teachers and staff during Parent/Teacher Conferences? Yes No

**Please return this form with your enrollment documents.**

**Please support your PTO by attending the monthly meetings!**