

Home School Association  
Family Volunteer Form 2008-2009

Each family can choose the HSA committee(s) they wish to fulfill their 30 hours of volunteer time supporting. Please complete this form and return to the school office no later than Monday, September 8<sup>th</sup>.

FAMILY NAME: \_\_\_\_\_ Volunteer First Name: \_\_\_\_\_

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

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

If you choose to Buy-Out your volunteer hours, please check the box below and return this form along with your check for \$300 payable to Trinity Academy HSA.

- We wish to Buy-Out our volunteer hours

Please select the committee(s) you will volunteer on for the 2008-2009 school year:

- After Six
- Class Parents \* you must also complete the Class Parent volunteer form
- Communications
- Fundraising (general)
  - Art Wear
  - Casino Night
  - Entertainment Books
  - Kid Stuff Books
  - Script Program
  - Shopping Certificates \* you must also complete the Shopping Certificate volunteer form
  - Tricky Tray
- Hospitality
- Library
- Lunch Room \* you must also complete the Lunch Room Assistant volunteer form
- Morning Parents
- New to School
- Parish Representative Parish:  St. Al's  OLBS  Notre Dame
- Playground Committee
- Shopping Certificates
- Social, Spiritual and Cultural Arts
- HSA Representative

Are you interested in being a Co-Chairperson for your selected committee?  Yes  No

If you have questions regarding volunteering, please email Marie Markey at: [smmarkey@optonline.net](mailto:smmarkey@optonline.net)