

PARENT VOLUNTEER FORM

Parents: In order for us to have a successful production, we need the help of our parents... both theatre AND music parents!!!! Please fill out the following information and return to Mrs. Voss ASAP. You may also email me if that is more convenient. nvoss@parkwayschools.net

Parent Name:			FacebookYN
Parent Cell:		Parent E-mail:	
Student Name:		Role	Current Grade:
GENERAL VOLUNTI	EER ACTIVITIE	<u>S WHERE WE</u>	COULD USE SOME HELP
Set construction	Sewing	/ Costuming	Cooking/baking
Public Relations	Other _		
Yes, I would be will			e following dates
Concessions - (involves sel	ling baked goods bet	fore the show and d	uring intermission)
Feb 23	Feb 24	Feb 25	Feb 26
Rehearsal Meals - (participa	ating in preparing the	e dinner for the cast	and crew on the two late nights)
Feb 20	Feb 21		
Box Office - (involves help	ing to sell tickets be	fore the show)	
Feh 23	Feb 24	Feb 25	Feb 26