

## **Rock Chapel PTA Volunteer** 2 Hour Power Pledge

PARENT/GUARDIAN	!	!RELATIONSHI	P TO CHILD
FARENT/GUARDIAN		RELATIONSHII	- TO CHILD
ADDRESS			
PHONE NUMBER		EMAIL ADDRESS	<del></del>
CHILD'S NAME	GRADE/CLASS	CHILD'S NAME	GRADE/CLASS
CHILD'S NAME	GRADE/CLASS	CHILD'S NAME	GRADE/CLASS
2 Hour Power Pled  Yes! I pledge to give 2	<b>ge</b> 2 hours to our school th	nis year.	
Yes! I pledge to give 2  Hour Power Plus  I am interested in giving following activities and/or continuous.	Pledge ng more than 2 hours t	o our school this year. I	am interested in helping with the school year (please check all that
Yes! I pledge to give 2  Hour Power Plus  I am interested in giving following activities and/or continuous.	Pledge ng more than 2 hours to homittees already sched	o our school this year. I	school year (please check all that
Yes! I pledge to give 2  Hour Power Plus  I am interested in giving following activities and/or contapply):	Pledge  ng more than 2 hours to hamittees already sched	o our school this year. I duled for the 2016-2017	school year (please check all that  Committee
Yes! I pledge to give 2  Hour Power Plus  I am interested in giving following activities and/or concapply):  Fall Festival Committee	Pledge  ng more than 2 hours to hamittees already sched	o our school this year. I duled for the 2016-2017 Membership	school year (please check all that  Committee
Yes! I pledge to give 2  Hour Power Plus  I am interested in giving following activities and/or contapply):  Fall Festival Committee  Room Parent Committee	Pledge ng more than 2 hours to nmittees already sched	o our school this year. I duled for the 2016-2017 Membership Corporate R	school year (please check all that  Committee  Committee

## mave Questions?

Please email us if you have any questions or if you have any of your own ideas for getting involved. Contact: rockchapelpta@gmail.com