



Please mark the areas you are interested in and return this form to the school.



Thank you.

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| <input type="checkbox"/> School canteen (infants roster) | <input type="checkbox"/> Reading tutor program |
| <input type="checkbox"/> School canteen (primary roster) | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> P and C | <input type="checkbox"/> Student Banking |
| <input type="checkbox"/> Infants helper | <input type="checkbox"/> School Garden Committee |
| <input type="checkbox"/> Special interest/other | |

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Name.....

Phone.....

Date.....

Signature.....