

PROJECT 2015 REGISTRATION FORM/INTEREST FINDER

STUDENT INFORMATION

Name (Last, First):		
School:	Home Phone:	
Address:		

PARENT INFORMATION

Parents Names:		
Address:		
Phone:	E-mail:	Other Email:

ALTERNATE CONTACT (IF APPLICABLE)

Name:	Email:
Address:	Phone:
Relationship:	

VOLUNTEER INTERESTS: Check all that apply and availability

Ongoing Events (over next 3 years)

- | | |
|---|--|
| <input type="checkbox"/> Parent Events
<input type="checkbox"/> Host
<input type="checkbox"/> Committee

<input type="checkbox"/> Merchandise (9 th and 10 th grades)

<input type="checkbox"/> Fundraising

<input type="checkbox"/> Student Events
<input type="checkbox"/> Service Projects
<input type="checkbox"/> Social Events

<input type="checkbox"/> Photos - Administer Shutterfly page for class | <input type="checkbox"/> Luncheons
<input type="checkbox"/> Host
<input type="checkbox"/> Committee

<input type="checkbox"/> Newsletter |
|---|--|

At this time we are asking for a \$10 one time registration fee from each family for the Project 2015 startup fund. Please return this form along with your check made payable to Project 2015 to our Treasurer:

Kathleen Maloney
47 Quail Ridge Road
Wilton, CT 06897

___ Enclosed is our \$10 Registration fee for Project 2015.....\$10.00

___ We would like to make an additional donation to Project 2015.....\$_____

Total Enclosed (check made payable to Project 2015)\$_____