



Brighton Band Booster

Volunteer Information Sheet

Parent/Guardian Name: _____

Student Name: _____ Grade: _____

Instrument: _____

Address: _____

City: _____ ST: _____ ZIP: _____

Phone numbers:

Home: _____

Mom's Cell: _____ Receive Text ? _____ Y/N

Dad's Cell: _____ Receive Text ? _____ Y/N

Email Address:

Mom's Primary Email: _____

Dad's Primary Email: _____

Preferred contact method:

_____ Phone _____ Email _____ Text (1st, 2nd, 3rd)

Interested in helping with: (Check all that apply)

<input type="checkbox"/> Chaperon trips (away games, competitions)	<input type="checkbox"/> Work Fundraiser events
<input type="checkbox"/> Build props / shelves / etc	<input type="checkbox"/> Haul / Transport equipment trailer
<input type="checkbox"/> Serve on committees	<input type="checkbox"/> Create Forms / Flyers
<input type="checkbox"/> Alter Uniforms	<input type="checkbox"/> Wash Uniforms
<input type="checkbox"/> Recruit Sponsors	<input type="checkbox"/> Work Concessions
<input type="checkbox"/> CDL ?	<input type="checkbox"/> CDL w/Passenger endorse?

WWW. BrightonBand.com
Check out our volunteer page.