

St. Gregory the Great Booster Club Volunteer Check-List

Volunteer Name: _____

Phone #: _____

E-mail Address: _____

Child(ren) Name(s): _____

Grade: _____ Classroom: _____

Grade: _____ Classroom: _____

Grade: _____ Classroom: _____

Grade: _____ Classroom: _____

Committee Participation:

_____ Booster Class Rep for Grade _____ Boys / Girls (please circle one)

_____ Communication Committee

_____ Photography Committee

_____ Facility Cleaning and Maintenance Committee

_____ Fundraising Committee

_____ Concessions Committee

_____ Student / Athlete Community Involvement Committee

Event Participation:

_____ Fall Sports Rally with Bonfire Date: Thursday, October 10th

_____ Fall Steak Roast Date: Saturday, October 26th

_____ Winter Sports Rally Date: Thursday, December 19th

_____ Night at the Races Date: To be determined

_____ Mens' Reverse Raffle Date: To be determined

_____ Spring Sports Rally Date: Friday, May 16th

_____ Field Day Date: Tuesday, May 27th

_____ Coaches Appreciation Night Date: To be determined

_____ 8th Grade Graduation Event Date: To be determined