

KENTWOOD ORGANIZATION OF PARENTS (KOP)

Student Name: _____ Date: _____

Parents who would like to volunteer to be part of committees that help the school set up programs and activities for enhancing student life may be involved as much as they would like to.

I am interested in participating in the Kentwood Parent Organization in the following activities: (Indicate if interested in being Chairperson)

Please check activities you would like to help with:

	School Activities	Specify How You Would Like to Help
<input type="checkbox"/>	School Picnic	
<input type="checkbox"/>	School Play	
<input type="checkbox"/>	Yearbook	
<input type="checkbox"/>	Grant Writing	
<input type="checkbox"/>	Building A New Campus	
<input type="checkbox"/>	Teacher Appreciation Week	
<input type="checkbox"/>	Fundraisers	
<input type="checkbox"/>	Public Relations	
<input type="checkbox"/>	Graduation and Awards Ceremony	
<input type="checkbox"/>	Thanksgiving Luncheon (Grades 1-12)	
<input type="checkbox"/>	Holiday Toy Drive	
<input type="checkbox"/>	Uniform Swap	
<input type="checkbox"/>	Student School Pictures	
<input type="checkbox"/>	Charitable Activities	
<input type="checkbox"/>	Videotaping School Events	
<input type="checkbox"/>	Holiday Parties (Grades 1-12)	
<input type="checkbox"/>	Food Drive	
<input type="checkbox"/>	Book Fair	
<input type="checkbox"/>	School Decorations for Holidays	
<input type="checkbox"/>	Other:	

Email Address: _____

Please elaborate the capacity in which you are able to assist:

Name of Parent/Guardian (print) _____