



# Christ the King Catholic School

## Parent Volunteer Form

### 2018 - 2019

**Date:** \_\_\_\_\_

**Parent(s) Name:** \_\_\_\_\_

**Student(s) Name:** \_\_\_\_\_

**Date of Service:** \_\_\_\_\_ **Number of Hours:** \_\_\_\_\_

**Activity or Event:** \_\_\_\_\_

**Volunteer Sponsor Name (print):** \_\_\_\_\_

**Sponsor Signature:** \_\_\_\_\_

**Sponsor Contact Phone Number:** \_\_\_\_\_



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