



BATON ROUGE MAGNET HIGH SCHOOL PARENT VOLUNTEER SIGN UP SHEET

PARENT 1

Name _____

Address _____

Home Phone _____

Cell Phone _____

Email _____

How would you prefer to be contacted? _____

Are you available to volunteer during the school day? _____ Yes _____ No

Please specify the days and times that you are available? _____

Student(s) at Baton Rouge Magnet High School: Name _____ Grade _____

Name _____ Grade _____

Brothers or sisters enrolled in Middle School: Name _____ Grade _____

Name _____ Grade _____

I/We would like to volunteer for :

Parent 1

Parent 2

- | | | |
|-------|-------|---|
| _____ | _____ | Concert/Event Chaperone |
| _____ | _____ | Providing Food For Hospitality, Concerts, or Rehearsals |
| _____ | _____ | Serve Refreshments at Concerts |
| _____ | _____ | Trip Chaperones |
| _____ | _____ | Audition Chaperones |
| _____ | _____ | Fundraising |
| _____ | _____ | Photography and Videography |
| _____ | _____ | Performing Arts Teacher and Administration Appreciation |

Special talents, hobbies, skills, interests, or professions we are willing to share with students:

1. _____

2. _____

For questions please contact any of Parent Volunteer Coordinators listed. Thank you!!!!

Shasta Felton, Orchestra Representative 225-938-5340

shastafelton@yahoo.com

Alecia Tate, Orchestra Representative 225-326-9276

aleciatat@gmail.com



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If you are a business owner/consultant would you be willing to donate gifts for special events? If so, please provide the best way to contact you: _____

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