



Seminole High School Band

The Pride of the Tribe

Volunteer Form

Along with the tireless efforts of our Directors and the hard work of our students, our volunteers are a key element to the success of the SHS Band program. **Please agree to give the band a few hours of your time and volunteer.**

Indicate your areas of interest below and return this form with your band camp registration packet. Thank you for your support! **YOU DO MAKE A DIFFERENCE!** (Please note that all volunteers/chaperones must be 18 years of age).

PLEASE PRINT ALL INFORMATION CLEARLY

Volunteer Name: _____ Student Name: _____

Volunteer Contact Info: EMAIL: _____ Telephone: _____

I would like to help with the following (indicate all areas of interest/availability):

<p>BAND CAMP (Mon, July 25 – Fri, July 29) Check times (shifts) and circle the day(s) you are available:</p> <p>_____ 1st Shift (8:30 am – 1 pm) M T W TH F</p> <p>_____ 2nd Shift (1 pm – 5 pm) M T W TH F</p> <p>_____ 3rd Shift (5 pm – 9 pm) M T W TH F</p> <p>_____ Other: _____ _____ _____</p>	<p>FUNDRAISING & EVENTS</p> <p>_____ Selling Snow Cones After School M T W TH F (1:30-3:30)</p> <p>_____ Quarter Days Chaperone (Sat & Sun)</p> <p>_____ Fundraising Committee Member (help planning and organizing fundraisers)</p> <p>_____ Prepare baked goods/food for events</p> <p>_____ Event Set-up and/or Clean-up</p> <p>_____ Donations Solicitation (solicitation of community businesses for donations for various fundraisers/events)</p>
<p>CHAPERONE</p> <p>_____ Football Games (Friday’s Aug – Dec)</p> <p>_____ Marching Festival (Oct 22)</p> <p>_____ Other Special Events</p>	<p>_____ EQUIPMENT COMMITTEE Helps with equipment set-up and tear-down for band camp, practice, football games (home & away) and at events.</p> <p>_____ PHOTOGRAPHY TEAM Takes pictures at games and events</p>
<p>GENERAL DONATIONS</p> <p>_____ Case(s) of Water</p> <p>_____ Office Supplies</p> <p>_____ Monetary Donation</p> <p>_____ Other: _____</p>	<p>SPECIAL SKILLS/CAPABILITIES:</p> <p>_____ Notary Public</p> <p>_____ Licensed Health Professional or First Aid Certified</p> <p>_____ Provide Services (printing, copying): _____</p>

