

**St. Bonaventure High School  
Family Volunteer Service  
2016-17 Record Sheet**

Student(s) Name Last \_\_\_\_\_ First \_\_\_\_\_ Grade \_\_\_\_\_  
 Last \_\_\_\_\_ First \_\_\_\_\_ Grade \_\_\_\_\_  
 Last \_\_\_\_\_ First \_\_\_\_\_ Grade \_\_\_\_\_

**Father's** Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

**Mother's** Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

In order to foster our faith community and support the school's overall educational purpose it is important that parents are directly involved with the school. School policy requires a minimum of 25 volunteer service hours per family (12 for single parent families). Service hours are to be recorded on this form. Families are assessed **\$20 per each unworked hour**. To ensure proper credit, your form must be filled out completely. **PLEASE SUBMIT ONE FORM ONCE ALL HOURS HAVE BEEN COMPLETED.** Forms must be turned in no later than May 15, 2017.

Event Name(s)	Date	Hours Worked	Chairperson's Signature
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL HOURS: \_\_\_\_\_.

BUYOUT OPTION: I am either unable to participate. My assessment of \$500 (\$240 for a single parent) is attached.