## PLEASE COMPLETE AND RETURN THE FOLLOWING INFORMATION TO THE PTSA DRAWER IN THE MAIN OFFICE

## VSAA Class of 2017 Parent/Student Information Sheet

Student Name:		
Home Phone:	Cell Phone:	
Address:		
City:	State: Zip:	
Student's email:		
Parent's Name:		
Home Phone:	Cell Phone:	
Parent's email:		
Parent's Name:		
Home Phone:	Cell Phone:	
Parent's email:		
	n fundraising or volunteering, you can nior activities. Checks should be made accept credit or debit cards.	
I am interested in serving on the	following committee(s):	
Party Planning	Burgerville Nights	
Advertising/Flyers	Back-to-School Event/BBQ	
Senior Auction/Showcase	Poinsettia Sales	
Gift to VSAA	Other	