



## VOLUNTEER PROGRAM 2023-2024 ACADEMIC YEAR

We are honored that you have taken interest in joining the BBharts Volunteer Program! There are so ways you can help, but in order for us to know the best place for you we would need to the dates, time and areas in which you will be helping!

## PLEASE CHECK BELOW THE DAYS YOU WILL BE VOLUNTEERING Monday Tuesday Wednesday Thursday Friday Saturday PLEASE LIST BELOW THE TIMES YOU WILL BE VOLUNTEERING \_\_\_\_\_ to \_\_\_\_ PLEASE SPECIFY THE AREA & FACULTY MEMBER YOU HAVE **SELECTED** PLEASE SIGN AND RETURN ON YOUR FIRST DAY I (Parent Name) \_\_\_\_\_ am aware and authorize that my child (Child Name) \_\_\_\_\_ Volunteers at BBharts during the hours and dates listed above. Parent Signature Parent Name

Parent Phone Number