



Volunteer!

2 hour shift 10-12 or 12-2

This exciting event is **completely** volunteer driven! Join the fun....no experience needed, help out, have fun, meet new people, and put smiles on kids' faces. For more details on the various jobs and activities please contact Petra at the email below or visit the website.

Please check off or circle your area of interest:

- | | |
|---|--|
| <input type="checkbox"/> Games supervision in gym | <input type="checkbox"/> Silent auction |
| <input type="checkbox"/> Games supervision outside | <input type="checkbox"/> Cupcake walk for younger kids |
| <input type="checkbox"/> Penny auction table | <input type="checkbox"/> Pizza service in staff room |
| <input type="checkbox"/> Hair braiding | <input type="checkbox"/> Ticket sales |
| <input type="checkbox"/> Finger nail painting | <input type="checkbox"/> Fortune teller |
| <input type="checkbox"/> Used book sale | <input type="checkbox"/> Jelly Bean Guess table |
| <input type="checkbox"/> Plant sale | <input type="checkbox"/> Bake table sales |
| <input type="checkbox"/> White Elephant sale | <input type="checkbox"/> Popcorn machine operator |
| <input type="checkbox"/> Coat / cake check room | <input type="checkbox"/> Friday set-up (2-8pm) |
| <input type="checkbox"/> Toonie toss | <input type="checkbox"/> Saturday set-up (8-10am) |
| <input type="checkbox"/> Cake walk | <input type="checkbox"/> Saturday clean-up (2-4pm) |
| <input type="checkbox"/> Kitchen assistance for BBQ | |

Name: _____

Email: _____ Home #: _____

Work #: _____ Cell #: _____

Please have this form returned to your child's class by Friday April 10th, 2015

Questions? Contact: Petra Alince 613-523-9198

petra.alince@gmail.com



DONATE BAKE

FOOD & BAKING DONATION FORM

I will be happy to donate the following for the Bake Sale, Cake Walk or Cupcake Walk:
No nuts please.

- Decorated Cake for Cake Walk Quantity: _____
- Decorated cupcakes Quantity: _____
- Baked good: Description & quantity :

Name: _____
Email: _____ Home # : _____
Work #: _____ Cell # : _____

SILENT AUCTION DONATION FORM

I have a service / item I would like to donate to the Silent Auction

Item: _____
Value: _____
Description: _____

Name: _____
Email: _____ Home # : _____
Work #: _____ Cell # : _____

PLEASE RETURN THIS FORM TO THE SCHOOL BY Friday April 10TH

This notice is also available online at <http://www.altavistacouncil.com> and on the AVPS website