



Parent Interest Form – 2023- 2024

Parent Name: _____

Parent Phone Number: _____

Parent Email Address: _____

Student's Name: _____

Student's Grade: _____

Homeroom Teacher: _____

Please circle your answers to the questions below:

1. I would like to volunteer as a Room Parent for my child's class:

YES NO

2. I give the PTA and Classroom Teacher permission to share my email address and phone number with the assigned room parents for my child's class.

YES NO

3. I would like to be contacted about joining one of the other PTA Committees.

List of PTA Committees: Teacher/Staff Appreciation, Arnold Fun Run, 5th Grade Promotion, Fall Festival, Holiday Breakfast, Holiday Secret Shop, and Sweet Spring Soiree (Committee descriptions can be found on the PTA website at www.arnoldespta.com)

YES NO Committee: _____

I understand that I must be a dues paying member of the PTA to be considered to be a room parent and that there is no guarantee that I will be selected. If you have not joined PTA yet, please visit our website at www.arnoldespta.com and join online. I consent to having my email address and phone number posted on the AES PTA Website if I am selected as a room parent.

****Please return this form to your child's classroom teacher ASAP or email to aesptaroomparents@gmail.com. Deadline to submit request is 9/7/23****