

## Churchill Road PTA Board Intentions Form

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current PTA Position: \_\_\_\_\_

General Description of the responsibilities associated with your position:

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Are you interested in volunteering in this position next school year?

Yes \_\_\_\_\_ No \_\_\_\_\_

If not, are you interested in some other position for next year?

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If not, do you have any leads for who may have an interest next year?

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Date received: \_\_\_\_\_