

**Office of Institutional Advancement  
PARENT VOLUNTEER FORM  
2018-2019**

Parent Name \_\_\_\_\_

Name of Student(s) \_\_\_\_\_ Year(s) \_\_\_\_\_

Home Address \_\_\_\_\_

Primary E-mail Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

I am interested in assisting the Advancement Office with the following activities  
(exact dates to be determined if not indicated):

**EVENTS:**

**Walkathon (October 26, 2018)**

\_\_\_ Clerical (day)  
\_\_\_ Day of Event (day)

**Alumni Reunion (April 6, 2019)**

\_\_\_ Registration (evening)  
\_\_\_ Raffle Sales (evening)

**Hall of Fame (November 10, 2018)**

\_\_\_ Registration (evening)  
\_\_\_ Raffle Sales (evening)

**Golf Classic (TBD)**

\_\_\_ Solicit Prizes for Raffles (day/evening)  
\_\_\_ Day of Event Volunteer (day/evening)

**Phonathon (Jan 28-30, Feb 4-6, 2019)**

\_\_\_ Fundraising Phone Calls (evening)  
\_\_\_ Paperwork (evening)

**OFFICE ASSISTANCE:**

\_\_\_ Database Maintenance (days) \_\_\_ General Clerical (days)

Check one: \_\_\_ weekly \_\_\_ as needed

Availability (please specify preferences or ALL):

Days \_\_\_\_\_ Hours \_\_\_\_\_

Evenings \_\_\_\_\_ Hours \_\_\_\_\_

**PLEASE RETURN FORM TO:**

Office of Institutional Advancement  
Holy Cross High School, 26-20 Francis Lewis Blvd., Flushing, New York 11358  
Email: Gabriella Bordenca at [gbordenca@myhchs.org](mailto:gbordenca@myhchs.org) Phone: 718-886-7250 x609