Fountain Valley Royal Regiment
PARENT HOURS PARTICIPATION RECORD

PARENT NAME:_____ **PHONE #**_____

STUDENT NAME _____**SECTION** _____

DATE	ACTIVITY	CHAIRMAN'S NAME	CHAIRMAN'S SIGNATURE	HOURS

Parents are responsible for having this sheet signed by the chairman upon completing each activity. Turn this form into the Band Box when 35 hours are complete to receive your credit.

OR

If you do not wish to work the (35) required volunteer hours, sign below and return with payment:
I understand that I will be charged and agree to pay the $200.00 Parent Hours Participation Fee.

Signed:_____ Dated:_____

For additional sheets please contact Evelyn Neal at (714) 963-5751 or fvrr_info@ntrplus.com