

SPX Home and School Association Declaration of Interest / Application

Personal Information

Name:

Address:

Telephone: (Home)

(Work)

(Cell)

Email:

Parish:

Qualifications

Children currently enrolled at SPX? Yes No

Completed the Protecting God's Children workshop? Yes No

BCI&I Background Check and fingerprints on file? Yes No

Objective / Interest

Are you interested in becoming a Board Member? Yes No

Are you interested in chairing a committee? Yes No

Are you interested in volunteering time or talent? Yes No

Comments or Questions

Signature of Applicant

Date
