

Word of Life Christian Academy - 2015-2016



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Be a Volunteer

Student's Name _____ Grade Level _____

Parent's Name _____ Phone# (____) ____ - _____

Your Volunteering makes a difference! Please take the time to check where you could become more involved in your student's school life and return this to the school office.

School:

Art Class

P. E. Class

Reading / Library

Math Games

English

Fundraisers

Take students out to recess.

Prepare Lunches / Heat up Lunches.

Other _____

Athletic Department:

Set up for Games

Run Clock

Take Gate

Score Keeper

Help with fund raisers

Other _____