PARENT CONTACT CARD

Parent Name:	
Girl Scout Name:	Girl Scout Name:
Phone Number:	Phone Number:
E-mail Address:	E-mail Address:
Please indicate the amount of time you are willing to volunteer	Please indicate the amount of time you are willing to volunteer
during the cookie season: hours	during the cookie season: hours
Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred.	Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred.
Booth sale support	Booth sale support
Cookie delivery and pick-up	Cookie delivery and pick-up
Gift of Caring collection and organization	Gift of Caring collection and organization
Cookie money treasurer	Cookie money treasurer
Do you have any special skills, hobbies or community connections that could be of assistance this cookie season?	Do you have any special skills, hobbies or community connectior that could be of assistance this cookie season?
Do you have any ideas you think we should try this year?	Do you have any ideas you think we should try this year?
Do you have any ideas you think we should try this year?	Do you have any ideas you think we should try this year? PARENT CONTACT CARD
PARENT CONTACT CARD	PARENT CONTACT CARD Parent Name: Girl Scout Name:
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number:	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number:
PARENT CONTACT CARD Parent Name: Girl Scout Name:	PARENT CONTACT CARD Parent Name: Girl Scout Name:
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number:	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number:
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address:	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address:
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: hours Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: hours Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred.	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: hours Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred.
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred. Booth sale support	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season:
PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred.	PARENT CONTACT CARD Parent Name: Girl Scout Name: Phone Number: E-mail Address: Please indicate the amount of time you are willing to volunteer during the cookie season: hours Please rank the following cookie season activities based on your preference, with 1 being most preferred and 4 being least preferred.

PARENT CONTACT CARD

Do you have any ideas you think we should try this year?

Do you have any ideas you think we should try this year?