



Brentwood Christian School Very Important Parent (VIP) Service Program Time and Talent Agreement School Year 2011-2012

Youngest Child's Name and Grade: _____ Home Phone:-----

Mother/Guardian: _____ Father/Guardian: _____
First & Last Name First & Last Name

Address: _____ City: _____ Zip: _____

Her Work Phone #: _____ Her Cell #: _____ Her Email: _____

His Work Phone #: _____ His Cell #: _____ His Email: _____

I/We (_____ are _____ are not) a single-parent family* as per the VIP definition.
 *For VIP Program purposes a single-parent family is defined as one active parent in the children's lives.

_____ **Financial Buyout Option – In lieu of BCS VIP Service:**
 Our family will be making a financial donation of \$400 (20 hours @\$20.00/hr.) per family or \$200 (10 hours @\$20.00/hr.) per single-parent family to the school office.

_____ **I will contact administration to confidentially request an exemption. I understand that if the administration approves of my request, my VIP service requirement will be 0 hours and I will not be assessed the Financial Buyout Option.**

This Time and Talent Service Agreement is required from each family per year. Please contact the school office at 835-5983 with any questions you may have. **Serving in other ministries will not be included in your school service hours.**

Mother's Signature: _____ Date: _____

Father's Signature: _____ Date: _____



BCS Activities and Events

Investing your time and talent at Brentwood Christian School has a positive impact on our children and the BCS community. It also helps us to continue to keep tuition low while maintaining educational excellence in a Christian environment. Please check the items below to indicate your areas of interest. These are some of the opportunities that can be used to fulfill your parent service of **20 hours per family or 10 hours per single-parent family, per school year**. Please make a special note if you have a strong preference for an activity, and every effort will be made to accommodate your request. Your name and contact information will be submitted to the coordinators of each activity, who will contact you as needs arise.

NAME (first & last): _____ **Contact Info(phone or email):** _____

- | | | |
|----------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Athletics-concession/admission | <input type="checkbox"/> Fall Festival assistance | <input type="checkbox"/> Math Command Grader |
| <input type="checkbox"/> Athletic Banquet- Elem/JH or HS | <input type="checkbox"/> Field Day assistance | <input type="checkbox"/> No Money Fundraiser help |
| <input type="checkbox"/> Athletics - field upkeep | <input type="checkbox"/> Grandparents' Day assistance | <input type="checkbox"/> Playgrounds upkeep |
| <input type="checkbox"/> Athletics - tournament help | <input type="checkbox"/> Homeroom Rep for Teacher OR | <input type="checkbox"/> PSIA Head or Asst. Coach |
| <input type="checkbox"/> Book Fair – Elem. or Sec. | <input type="checkbox"/> Help for Secondary Class Sponsor: _____ | <input type="checkbox"/> Qualified Student Tutor |
| <input type="checkbox"/> Campus beautification workday | <input type="checkbox"/> Jog-a-Fun assistance | <input type="checkbox"/> Teacher Appreciation Luncheons |
| <input type="checkbox"/> Class Fundraiser help- JH or HS | <input type="checkbox"/> Lego League Coach | <input type="checkbox"/> Teacher Workroom Hospitality |
| <input type="checkbox"/> Directory data entry/editing | <input type="checkbox"/> Library Aide - Elem. or Sec. | <input type="checkbox"/> Uniform Resale assistance |
| <input type="checkbox"/> Event Coordinator/Coach : | <input type="checkbox"/> Cafeteria Server | <input type="checkbox"/> Young Author Reader |
| _____ | <input type="checkbox"/> Other _____ | |
- _____ Undecided how I will serve at this time but will review monthly opportunities and make contact with Coordinator.

**This form is to be completed and returned at registration. If this form is not completed and returned by August 30, 2011 your BCS account will automatically be billed the Financial Buyout Fee amount of \$200 or \$400 accordingly.
Thank you for your cooperation.**