

Fountain Valley Royal Regiment PARENT BINGO RECORD

STUDENT NAME _____

Parent/Guardian Name: _____

Phone #: (_____) _____ Cell Phone #: (_____) _____

DATE	ACTIVITY	CHAIRMAN'S NAME	CHAIRMAN'S SIGNATURE
	BINGO		
	BINGO		
	BINGO		

Parents are responsible for having this sheet signed by the chairman upon completing each activity. Turn this form into the Band Box when 3 Bingos are completed to receive your credit.