

January, 2003

Dear Elementary Level Principal:

The Elementary Level Schools Board of Control of the Connecticut Association of Schools takes great pleasure in announcing the 3rd Annual Elementary Parent Volunteer Recognition Banquet to be held on March 26, 2003 at the Aqua Turf Club, Southington, at 6:00 p.m.

OBJECTIVE

This program is intended to give public recognition to parents or others who have made major contributions to your school. Contributions may include volunteering, organizing an event(s), donations, etc. Our major purpose is to provide you with an opportunity to say "Thank you" in a very special way.

PROCEDURE

To participate in this program, we ask that you submit on the form provided the names of the volunteer(s) you want to recognize and three sentences describing their contributions. We ask that you select no more than **three (3) parents**.

COST TO MEMBER SCHOOLS

The cost of the dinner for all attendees will be \$25.00 each. Please note that tickets for family members of recipients, administrators, Board of Education members, central office personnel, and PTO members may be purchased in advance. NO tickets will be available at the door, nor will anyone be admitted who has not been previously registered by the school principal. We are able to reserve individual tables for schools sending groups of 10. Smaller groups from the same school will be seated with participants from another school. At this time we do not anticipate being able to accommodate more than 10 from an individual school.

RESERVATIONS

We expect that the vast majority of our elementary schools will participate. Your early response will both determine your school's seating location and be of help to us in many ways. You are asked to examine the accompanying documents closely. The Elementary Level Board looks forward to receiving notification of your awardees and to greeting you on March 26, 2003 at the Aqua Turf. **We must receive your reservations by MONDAY, FEBRUARY 24, 2003.** At this time, we should also be notified of any special dietary requests.

Sincerely,

Co-Chairpersons: Louis Pear, Gina Vance and Paula Erickson
Parent Recognition Program

CONNECTICUT ASSOCIATION OF SCHOOLS
 30 Realty Drive, Cheshire, Connecticut 06410
 Telephone 203-250-1111/Fax 203-250-1345

(PLEASE TYPE SO NAMES ARE LEGIBLE FOR NAME TAGS AND PROGRAM)

This form and reservation request must be received no later than **MONDAY, FEBRUARY 24, 2003.**

I _____ Principal of _____ School
 Street _____ Town _____ Zip _____
 Telephone _____

Submit the attached form for recognition by the Connecticut Association of Schools.

 Signature of Principal

ELEMENTARY PARENT VOLUNTEER BANQUET RESERVATION REQUEST
Aqua Turf, Southington, Wednesday, March 26, 2003

1. Attendance is restricted to selected volunteer, family member of the recipient, members of the school administration and central office, faculty, including PTA representative, and Board members.
2. Tables for groups of 10 may be reserved. Smaller groups will share tables with other schools.
3. List each person who will be attending on a separate line.
4. Remittance should be **payable to CAS Elementary Parent Volunteer Banquet.**
5. **Reservation requests made after February 24, 2003 may possibly not be honored.**
6. Confirmation and tickets will be sent to the principal during the 3rd week of March.
7. **If you must process your check, please send in your form at once, and make note "check to follow."**
8. Non-member schools will pay a one time additional fee of \$40.00.
9. If you have any questions about completing this form, contact Jennifer Lacroix at CAS at 203-250-1111.

Name	Title	Beef	Chicken	Veg.	CK. /Amt. & CK. Number	Non Member Fee \$40.00
1.	AWARD RECIPIENT					
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
	TOTAL DINNERS:					

For CAS Use Only:

Recipient	School	Town	Table #	Date Ck. Recd.

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30 Realty Drive, Cheshire, Connecticut 06410
Telephone 203-250-1111/FAX 203-250-1345

ELEMENTARY SCHOOL PARENT VOLUNTEER RECOGNITION PROGRAM

Directions: Please **TYPE** the following form. Kindly cite the rationale for recognizing your parent(s). Limit your response to a **maximum of three sentences**. A souvenir program booklet recognizing each parent and their contributions will be prepared for each member school. You can also e-mail the write-ups to me: jlacroix@casciac.org.

<u>SCHOOL INFORMATION</u>	School Name and Street Address:
City:	State/Zip:
PHONE:	FAX:
PRINCIPAL:	

PARENT VOLUNTEER RECOGNITION PROGRAM:

Volunteer 1(Name):
(Write-up):
Volunteer 2 (Name):
(Write-up):
Volunteer 3 (Name):
(Write-up):

IMPORTANT REMINDER

At last year's recognition banquet we presented to each school a plaque which had the recipients' names engraved. To have the new recipients' names engraved this year, please submit a blank plate from your plaque and enclose it with your registration form. We will have the plate engraved so you will have it at the banquet.

Recipients' Names for Plaque (Please Print or Type):

1) _____

2) _____

3) _____

New Participating School (New schools will receive a plaque)

Previously participating school