

South Butler Primary School Room Parent Party Checklist



Room Number: _____ Teacher: _____

Party: _____ Party Date: _____

Time Helpers Arrive: _____ Time of Party : _____

Room Parent: _____ Phone # : _____

Party Leader: _____ Phone # _____

Party Volunteers:

_____ Phone# _____

_____ Phone# _____

_____ Phone# _____

Was note sent home with class? Yes / No

Were treat bag made? Yes / No By Whom: _____

Are You Having/Person Responsible To Donate:

Craft: _____

Games: _____

Snack: _____

Drink: _____

Bringing Treat Bags: _____



Teachers keep for your office records.