Gavin Music Booster Survey

*The Gavin Music Boosters is always looking at ways to enhance what the Boosters can give back to those students in the Gavin music program.*

*By taking a few moments of your time, you can provide the Music Booster Club Board with valuable insight regarding your satisfaction and ideas for the future. Please complete this survey and return it to school by* ***Friday, October 19th****.*

Were you in Music Boosters last year? Yes No

What was your overall experience last year?

NA 1 unsatisfied 5 satisfied 10 very satisfied

Comments:

What events/information/benefits would you like your child to receive as part of the Gavin Music program?

Comments:

What is your purpose in joining the Gavin Music Booster Club? (choose any or all that apply)

* Helping support the Gavin Music Boosters
* Social Aspects of belonging to a club
* Supporting keeping music in the schools
* To keep informed of music events in Gavin School

Other:

What events (if any) do you know of that the boosters could perform at outside the school?

Comments:

Do you have any ideas to fundraise for the Music Boosters?

Comments:

What we can do with the money Music Booster raises?

Comments:

Yes I’d like to get involved!

*The purpose of this survey is to collect the areas of interest you have in becoming an active member of the Gavin Music Boosters Club.*

**If you are interested in becoming more involved with the Booster Club (aside from simply attending events) please indicate the area(s) you would like to help with:**

* + Concert set up
	+ Concert tear down
	+ Selling 50/50 tickets at concerts
	+ Selling photo buttons
	+ Committee head
	+ Taking photo buttons at concert
	+ Spaghetti dinner helper
	+ Donation collector for spaghetti dinner
	+ Booster Club shopper
	+ Dog n suds
	+ Party chaperone
	+ Booster Club Member Only

Thank you for volunteering to become an active participant in the Gavin Music Booster Club! A Booster Board member will contact you regarding the area(s) you are interested in helping with.

**Name:**

**E-mail address:**

**Phone Number:**

**School your child(ren) go to: South Central**