

Renaissance 35-59 81st Street, Jackson Heights, New York 11372 Renaissance 2 60-02 Maspeth Avenue, Maspeht, New York 11378

TRCS Parent Association Form 2020-2021 School Year

what is the trcs parent association (TRCS PA)?

TRCS is strongly committed to parental involvement in all aspects of school governance. The primary goal of the PA is to foster communication and collaboration between the parents and families of our children and the teachers and staff of TRCS. The PA strives to broaden parent's understanding of our school structure and programs. The PA is active in several committees including Collaborative School Governance and Fund-Raising volunteerism. In addition, parents are included in various school-wide activities such as Hiring, Nutrition, Safety and new family support.

what does the PA do?

The PA serves as your voice as well as an information resource. And your annual PA monetary gift will help support programs for every student cluster, such as funding class libraries, supporting the sports program and arts program, and helping to fund Teacher's Choice which allows teachers from PK-12 to purchase necessary classroom supplies. The PA funds also support the Middle School Stepping-Up Ceremony, Senior Graduation, year-end trips and the Angel Fund.

2020-2021 fundraising goal!

Please print the following:

The fundraising goal for the upcoming school year is \$20,000. We can raise over \$16,000 with your help by sending in your PA annual gift TODAY. Your annual contribution to the PA demonstrates your commitment to our children and the school and allows us to continue to provide necessary funding for programs and initiatives, which would not be possible without the financial support of our families. Throughout the year, the school will hold various fun(d)-raising events! You can provide additional support by volunteering to help out at one of the family friendly, virtual and socially-distanced events, and if you have ideas, we would love to hear about them. Please fill out the form below.

| Last Name of Parent or Guardian | First Name | | Middle Initial | |
|---|--------------------------------|---------------------------|-----------------------------|----------------------------|
| Street Address | City | | State | Zip |
| Telephone (Daytime) | Telephone (Evening) | E-mail Addre | ess (Used to contact you fo | r school updates and news) |
| Name and Grade of Child/Children attending TRCS | | | | |
| 2 Please contact me – I may be avail | able for the following activit | ies*: | | |
| 1 | 2 | 3 | | |
| *Involvement is needed/appreciated in many diff 3 Check annual contribution level: Family (With one child at TRCS) \$25 | _ | re children at TRCS) \$30 | Other \$_ | |
| 4 Make your check payable to "Frier form with payment to the main of | | ent Association in the m | emo line) and I | return this completed |
| what if i have questions? If you have any questions, please conta | ct: peggyheeney@rencharter | org | | |
| do you have suggestions or com | ments? | | | |