



Membership Form



Thank you for joining PTA/PTSA! We all have a vested interest in seeing children succeed, and it is the members that make it possible for PTA to serve the interests of children and youth.

Name: _____

Address: _____

Phone: _____

Email: _____

Total Dues Amount Paid: \$ _____ Date: _____

PTA/PTSA USE ONLY: Amount Paid _____ CK# _____ DATE: _____



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