



# PTSA Membership Form

\$5.00 Each Adult

Form & Payment can be returned to PTSA via your child's 1st period teacher

	First Name	Last Name	Parent/Guardian	Teacher	Non-Teaching Faculty	If Student then Grade	Willing to Volunteer?
<b>#1</b> 1st Member	_____	_____	_____	_____	_____	_____	_____
Email	_____						
2nd Member	_____	_____	_____	_____	_____	_____	_____
Email	_____						
3rd Member	_____	_____	_____	_____	_____	_____	_____
Email	_____						
4th Member	_____	_____	_____	_____	_____	_____	_____
Email	_____						

**#2** Student's Name (if not joining above as a member): \_\_\_\_\_

1st Period Teacher for Student (This is where we'll deliver the PTSA cards): \_\_\_\_\_

**#3** PLEASE MAKE CHECKS PAYABLE TO TEWMS PTSA -  
(Check must have a phone # and student ID # on it.)

_____	_____	\$ _____
# Adults	# Students	Amount Collected

