

VOORHEESVILLE PTA MEMBERSHIP

I (we) Wish to become a PTA member...

NAME: _____ (**&**) _____

E MAIL(S): _____

PHONE #: _____

CHILD'S NAME(s) _____

GRADE(s): _____

TEACHER(s): _____

NUMBER OF MEMBERSHIPS _____ **X \$5.00 = Amount enclosed**
\$ _____

Make checks payable to "Voorheesville PTA."

Write membership in your memo section - thanks!

Please address to "PTA MAILBOX - ATTN. MEMBERSHIP ". Drop off at office or have child hand to any classroom teacher.