

MEMBERSHIP FORM 2017-2018

Thank you for joining Piedmont Middle School PTA. Please fill out this form and return it along with your **\$10.00 per person** membership fee, to your child's homeroom teacher. You may also mail this form along with your membership fee to:

## Piedmont Middle School 955 Piedmont Road San Jose, CA 95132 Attn: PTA

Please make the check payable to: **Piedmont Middle School** 

PRIMARY MEMBER	Please print			
Last Name:	First Name:			
Student's Name:	Gra	ade: Hom	eroom Teacher:	_
Address:				
City:Sate:Zip:				
Phone#:	Email Ad	ddress:		Membership Due:
ADDITIONAL MEMBER	(S) Please print			→ →
Last Name:		First Name:		
Phone#:				-
Last Name: First Name:				_
Phone#:	Email Address:			Total amount due:
Sector States St				<b></b> \$
Please check the box(es) below where you will be able to assist Piedmont PTA. Thank you for volunteering.				
Fundraising	Career Day	Book Fair	<i>Best way to contact you:</i> Phone	
School Events	Teacher Appreciation Week	Other		
FOR OFFICE USE ONLY:				
PAYMENT INFORMATIO	<u>NC:</u>	MEI	MBERSHIP:	
Date:		Dat	e entered:	
Amount: \$ Membership card distributed on:				
Payment Type: Cash Check # Processed by:				
Received by:				