PIEDMONT MIDDLE SCHOOL PTA

everychild. onevoice.

MEMBERSHIP FORM 2018-2019

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: _____Grade: _____ Homeroom Teacher: _____

Address: _____

City:Sate:Zip: _____

Phone#: _____ Email Address: _____

ADDITIONAL MEMBER(S) *Please print*

Last Name: _____ First Name: _____

Phone#: _____ Email Address: _____

Last Name: _____ First Name: _____

Phone#: _____ Email Address: _____

Membership Due:

$ _____

Total amount due:

$ _____

Volunteer Opportunities

Please check the box(es) below where you will be able to assist Piedmont PTA. Thank you for volunteering.

☐ Fundraising ☐ Career Day ☐ Book Fair

☐ School Events ☐ Teacher Appreciation Week ☐ Other _____

Best way to contact you:

☐ Phone

☐ Email

FOR OFFICE USE ONLY:

PAYMENT INFORMATION:

Date: _____

Amount: $_____

Payment Type: Cash Check #_____

Received by: _____

MEMBERSHIP:

Date entered: _____

Membership card distributed on:_____

Processed by: _____