



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**

<div style="border: 1px solid black; padding: 2px; display: inline-block; background-color: #cccccc;">PRIMARY MEMBER</div> <i>Please print</i>													
Last Name: _____ First Name: _____													
Student's Name: _____ Grade: _____ Homeroom Teacher: _____													
Address: _____													
City:State:Zip: _____													
Phone#: _____ Email Address: _____	Membership Due: \$ _____												
<div style="border: 1px solid black; padding: 2px; display: inline-block; background-color: #cccccc;">ADDITIONAL MEMBER(S)</div> <i>Please print</i>													
Last Name: _____ First Name: _____													
Phone#: _____ Email Address: _____													
<hr style="border-top: 1px dotted black;"/>													
Last Name: _____ First Name: _____													
Phone#: _____ Email Address: _____	Total amount due: \$ _____												
<p>Volunteer Opportunities</p> <p>Please check the box(es) below where you will be able to assist Piedmont PTA. Thank you for volunteering.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Fundraising</td> <td><input type="checkbox"/> Career Day</td> <td><input type="checkbox"/> Book Fair</td> <td rowspan="2" style="vertical-align: top;"><i>Best way to contact you:</i></td> </tr> <tr> <td><input type="checkbox"/> School Events</td> <td><input type="checkbox"/> Teacher Appreciation Week</td> <td><input type="checkbox"/> Other _____</td> <td><input type="checkbox"/> Phone</td> </tr> <tr> <td colspan="3"></td> <td><input type="checkbox"/> Email</td> </tr> </table>		<input type="checkbox"/> Fundraising	<input type="checkbox"/> Career Day	<input type="checkbox"/> Book Fair	<i>Best way to contact you:</i>	<input type="checkbox"/> School Events	<input type="checkbox"/> Teacher Appreciation Week	<input type="checkbox"/> Other _____	<input type="checkbox"/> Phone				<input type="checkbox"/> Email
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			<input type="checkbox"/> Email										

FOR OFFICE USE ONLY:

PAYMENT INFORMATION:

Date: _____
 Amount: \$ _____
 Payment Type: Cash Check # _____
 Received by: _____

MEMBERSHIP:

Date entered: _____
 Membership card distributed on: _____
 Processed by: _____