



2017/2018 Membership Form

\$5.00 per member

Please fill in the form below and return it to your child's teacher. PLEASE PRINT.

Member 1 – Name		#
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Student <input type="checkbox"/> Grandparent <input type="checkbox"/> Business <input type="checkbox"/> Sponsorship <input type="checkbox"/> Other	
Member 2 – Name		#
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Student <input type="checkbox"/> Grandparent <input type="checkbox"/> Business <input type="checkbox"/> Sponsorship <input type="checkbox"/> Other	
Member 3 – Name		#
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Student <input type="checkbox"/> Grandparent <input type="checkbox"/> Business <input type="checkbox"/> Sponsorship <input type="checkbox"/> Other	
Member 4 – Name		#
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Student <input type="checkbox"/> Grandparent <input type="checkbox"/> Business <input type="checkbox"/> Sponsorship <input type="checkbox"/> Other	
Member 5 – Name		#
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Student <input type="checkbox"/> Grandparent <input type="checkbox"/> Business <input type="checkbox"/> Sponsorship <input type="checkbox"/> Other	
Member 6 – Name		#
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Student <input type="checkbox"/> Grandparent <input type="checkbox"/> Business <input type="checkbox"/> Sponsorship <input type="checkbox"/> Other	
Mailing Address		
Phone Number		
Email Address *required, list all that apply*		

Child's Name	Teacher	Grade
1.		
2.		
3.		
4.		

Membership Dues: _____ members x \$5.00 per member	\$
I want to make a donation to the Shelton Elementary PTA General Fund	\$
Total Enclosed <i>(Please make checks payable to Shelton Elementary PTA)</i>	\$

Thank you for supporting Shelton Elementary PTA!

PTA Use Only: Date _____ Cash Check # _____ Completed by: _____

Recorded in Excel Membership Packet Sent Classroom Roster Updated