

# PTA Membership Form



Please fill out this form and return to the school office.

You will receive a donation receipt for your tax records.

Yes, I/we want to become a PTA member:

Name 1 : \_\_\_\_\_  
(last,first)

Name 2: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Students at Strandwood:

\_\_\_\_\_ (name) (grade)

\_\_\_\_\_ (name) (grade)

\_\_\_\_\_ (name) (grade)



everychild.one voice.