

Date:

Rec'd By:

Cash or Check

Ellis PTA 2010 – 2011 Membership Application

New Member _____

Returning Member _____

Membership Fee \$5.00

Name: _____

Address: _____

Phone (home): _____ Cell: _____

Email: _____

I am a _____ Parent _____ Grandparent _____ Other (relation) _____

Student(s) Information:

Name	Grade	Teacher

Committee Interest: (Please note that your information/interest will be forwarded on to the committee chairs and you will be contacted by them directly)

- | | | |
|---|--|---|
| <input type="checkbox"/> Arts Enrichment | <input type="checkbox"/> Health & Wellness | <input type="checkbox"/> Science Enrichment |
| <input type="checkbox"/> Bobcat Boosters | <input type="checkbox"/> Montessori Advocacy | <input type="checkbox"/> School Beautification & Safety |
| <input type="checkbox"/> Bobcat Dads | <input type="checkbox"/> Family Engagement
Room Parent Interest, please | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Cultural Diversity | Indicate Room: _____ | <input type="checkbox"/> Teacher/Staff Appreciation |

*Other area of interest (please specify): _____

I would like to offer my support & make a monetary donation to the PTA in the amount of \$_____.

I would like to sponsor a PTA Membership for the following person(s): _____

I give consent to have my family photographed during PTA events for use on PTA website and publication materials.

Signature _____

Date _____