

PTSA MEMBERSHIP FORM

PLEASE TYPE IN OR PRINT NEATLY and include all SVMS students in family, if completing only one form. Note that the student and parent contact information you provide in the box below will be provided in the PTSA student directory, unless you indicate otherwise (see PTSA Student Directory section below). Thank you.

Parent 1 _____	Home # _____	Cell # _____
Parent 2 _____	Home # _____	Cell # _____
Student Name _____	Grade _____	Advisor _____
Student Name _____	Grade _____	Advisor _____
Student Name _____	Grade _____	Advisor _____
Student Address _____		
Email _____	<input type="checkbox"/> parent <input type="checkbox"/> student	<input type="checkbox"/> parent <input type="checkbox"/> student

> PTSA Membership

\$12.00 Basic membership per member (membership includes 1 FREE PTSA Directory per family).

Please write the full name of the member and indicate if the member is a parent or student.

Member 1		<input type="checkbox"/> parent <input type="checkbox"/> student
Member 2		<input type="checkbox"/> parent <input type="checkbox"/> student
Member 3		<input type="checkbox"/> parent <input type="checkbox"/> student
Member 4		<input type="checkbox"/> parent <input type="checkbox"/> student
Total # Members x \$12.00 each		\$ _____

> PTSA STUDENT DIRECTORY

Order multiple directories @ \$5 each.

- Check here for a FREE directory with PTSA Membership (1 directory per family) NO CHARGE
- Purchase a directory (\$5 each) Number of directories _____ X \$5.00 = \$ _____
- Do NOT include my contact information in the SVMS PTSA Directory

DONATION for 8 th Grade Promotion Dance	\$ _____
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TOTAL PAID (ADD ALL OF THE ABOVE)	\$ _____
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Return this completed form and your payment to the PTSA table at Registration or to the SVMS school office). Please make check payable to SVMS PTSA.

<i>Payment Information (For SVMS PTSA use only)</i>			
<input type="checkbox"/> Check	Check # _____	<input type="checkbox"/> Cash	Amount Paid: \$ _____