

PTA
MEMBERSHIP DUES
\$5.00
PER PERSON

Centerville Elementary School 2011-12 PTA Membership Form

PTA USE ONLY

Dues Paid by:
Check # _____
Cash \$ _____
Membership card given:
Yes Send

PLEASE PRINT

Name: _____

Check for multiple memberships. Number of memberships _____

Additional names for memberships _____

I am a: Parent Community Partner Staff Member

Address: _____

Phone: (home) _____ (mobile) _____

Email: _____

Yes, I'm interested in helping the PTA.

Number of Children at Centerville Elementary School: _____

Name	Teacher	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Ethnic Origin: Caucasian African-American Hispanic Asian Mixed

If mixed, please specify: _____ (Example: Caucasian/Asian)

Occupation/ Hobbies/Areas of Interest: _____
