

MOUNT PLEASANT PTA MEMBERSHIP APPLICATION 2016-2017

PTA WELCOMES YOU AS A MEMBER, PLEASE COMPLETE INFORMATION BELOW

PLEASE PRINT

Parent/Guardian _____ Grandparent _____ Teacher/Staff _____ Other _____

Name (s): _____

Address: _____

Home#: _____ Mobile#: _____

Email _____

Occupation or special interest/ talent to help in PTA Events:

Child (ren)

Name: _____ Grade: _____ Teacher: _____

Name: _____ Grade: _____ Teacher: _____

Name: _____ Grade: _____ Teacher: _____

Annual Individual Membership: \$10.00

Additional Donation: \$

Please make checks payable to: Mount Pleasant PTA

Thank you for your support. If you have any questions, please contact me @
mags_80@hotmail.com

Margaret Sosa

Mount Pleasant PTA Membership Chairperson