

**2009/2010**  
**PTO MEMBERSHIP APPLICATION**  
**\$1.00 FEE**

Name:

(If you are a teacher \_\_\_\_ please check.)

PHONE NUMBER:

E-MAIL ADDRESS:

CHILD/CHILDREN NAME(S)

\_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_  
\_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_  
\_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

PLEASE CIRCLE WHICH AREAS INTEREST  
YOU

(WE NEED YOUR HELP!)

**Fund Raising**

**Special Events**

**Teacher Appreciation**

**Market Day**

**Label helper (Campbell's, et cetera)**

Please return this form to our treasurer.