

PTA MEMBERSHIP FORM



Help support your child's education by joining Drayton Hall Elementary's PTA!

Memberships are \$6.00 per person. Please make checks payable to Drayton Hall Elementary PTA.

Date ____/____/____

1st Member _____ Email _____
Address _____ City _____, SC Zip _____
Phone (____) _____ home work cell
 parent faculty/staff donate membership for: _____

2nd Member _____ Email _____
Address _____ City _____, SC Zip _____
Date ____/____/____ Phone (____) _____ home work cell
 parent faculty/staff donate membership for: _____

3rd Member _____ Email _____
Address _____ City _____, SC Zip _____
Date ____/____/____ Phone (____) _____ home work cell
 parent faculty/staff donate membership for: _____

4th Member _____ Email _____
Address _____ City _____, SC Zip _____
Date ____/____/____ Phone (____) _____ home work cell
 parent faculty/staff donate membership for: _____

If student is not listed above as a new member of the PTA, please list name and grade below:

Student Name _____ Grade ____ Teacher _____

Student Name _____ Grade ____ Teacher _____

_____ memberships @ \$6.00 each = \$ _____ check # _____ cash

THANK YOU!! Please return form and check to your teacher in an envelope marked PTA.

Questions? Contact Mary Whiteside, PTA Membership Chairperson.

For PTA Use:

Date rec'd: ____/____/____ Cards issued: ____/____/____ Payment amount \$ _____