

# 2017-2018 JLMS PTSA Membership Form

**\$5 Member Name:** \_\_\_\_\_  M  F

Mother     Father     Student (Grade \_\_\_\_\_)     JLMS Teacher     JLMS Staff     Grandparent

Please provide your email address to receive PTSA news, events and volunteering opportunities:

\_\_\_\_\_

**\$5 Additional Member Name:** \_\_\_\_\_  M  F

Mother     Father     Student (Grade \_\_\_\_\_)     JLMS Teacher     JLMS Staff     Grandparent

Please provide your email address to receive PTSA news, events and volunteering opportunities:

\_\_\_\_\_

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Mother     Father     Student (Grade \_\_\_\_\_)     JLMS Teacher     JLMS Staff     Grandparent

Please provide your email address to receive PTSA news, events and volunteering opportunities:

\_\_\_\_\_

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Mother     Father     Student (Grade \_\_\_\_\_)     JLMS Teacher     JLMS Staff     Grandparent

Please provide your email address to receive PTSA news, events and volunteering opportunities:

\_\_\_\_\_



*Checks must be payable to JLMS PTSA and include student ID/phone #*

Date: \_\_\_\_\_ Total Amount \$: \_\_\_\_\_  Cash  Check

