FOOTHILLS MIDDLE SCHOOL
2011-2012 PTSA
MEMBERSHIP FORM
Thank you for joining PTSA!

Parent Name(s):____________________________________________

Address:________________________________ Phone:____________

E-mail Address:______________________________________________

Parent-Teacher-Student-Association
(Membership strongly encouraged...but optional)

Please Mark your Choice of Annual Membership Fee:
   $10 individual ( )
   $25 family (two adults in a household) ( )
   $50 gold ( )
   $75 platinum ( )
   $100+business ( ) must list owner’s name

Paid Cash______ Paid Check______ Check#__________

Volunteer Parent Organization, encouraging communication and support among students, parents, teachers, and staff, working in a combined effort to help all of our children learn and grow.

• What topics and activities you would like to be involved in during our by monthly General Membership and Parent Meetings? Do you have a skill in this area that you would like to share during the meeting?