



**STRONGSVILLE HIGH SCHOOL PTA
MEMBERSHIP FORM 2021-2022**

Parents Name(s): _____ SHS Staff: yes
Address: _____ Zip Code: 44136 44149
CIRCLE YOUR ZIP CODE
Phone: _____
Home Mom – Work &/or cell Dad – Work &/or cell
E-Mail: _____

**PARENTS OF SENIORS MUST BE MEMBERS BY *JANUARY 31, 2022*
IN ORDER FOR YOUR CHILD TO QUALIFY FOR PTA SCHOLARSHIPS!**

Name of Student(s)	Grade	
1. _____ / _____		If your child is a SENIOR, check the schools attended: <input type="checkbox"/> SMS <input type="checkbox"/> Allen <input type="checkbox"/> Chapman <input type="checkbox"/> Drake <input type="checkbox"/> Kinsner <input type="checkbox"/> Muraski <input type="checkbox"/> Surrarrer <input type="checkbox"/> Whitney <input type="checkbox"/> Zellers <input type="checkbox"/> St. Joseph/John
2. _____ / _____		
3. _____ / _____		
4. _____ / _____		

MEMBERSHIPS: INDIVIDUAL (\$5.00) FAMILY (\$10.00) STAFF (\$5.00) Grandparent (\$5.00)

**Make checks payable to: SHS PTA
MAIL TO: Strongsville High School PTA Membership
c/o 20025 Lunn Road Strongsville OH 44149**

****Please include a stamped, self-addressed envelope for your membership card(s)****

Questions?? Contact: Lori Silvis at loriandjohn@sbcglobal.net

For PTA USE ONLY

Cash \$	Check#	Amount \$	Date Received:	Card(s) <input type="checkbox"/> yes <input type="checkbox"/> no
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THANK YOU FOR YOUR SUPPORT!