



MEMBERSHIP AND DONATION FORM

\$10.00 Parent / Teacher / Grandparent / Friends

\$8.00 Student

Name	Type (check appropriate box)	Amount
	<input type="checkbox"/> Parent <input type="checkbox"/> Student - Grade _____ <input type="checkbox"/> Teacher <input type="checkbox"/> Other:	
	<input type="checkbox"/> Parent <input type="checkbox"/> Student - Grade _____ <input type="checkbox"/> Teacher <input type="checkbox"/> Other:	
	<input type="checkbox"/> Parent <input type="checkbox"/> Student - Grade _____ <input type="checkbox"/> Teacher <input type="checkbox"/> Other:	
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	<input type="checkbox"/> Parent <input type="checkbox"/> Student - Grade _____ <input type="checkbox"/> Teacher <input type="checkbox"/> Other:	
	<input type="checkbox"/> Parent <input type="checkbox"/> Student - Grade _____ <input type="checkbox"/> Teacher <input type="checkbox"/> Other:	
Additional Donation. <i>Thank you!</i>		\$
Total - Cash only or pay online		\$

Email address: _____

Contact Phone Number(s): _____

Student Name: _____

Grade: ☐ 6th ☐ 7th ☐ 8th _____

☐ I would like to be contacted about volunteering.

☐ Pueden comunicarse conmigo paraq ser voluntario.

WHAT WOULD YOU LIKE TO SEE THE PSTA DO FOR YOU?

We want to hear your ideas and suggestions



YOU MATTER

YOU MAKE A DIFFERENCE

WE NEED YOUR VOICE, TALENT & CONTRIBUTIONS

Join now

Email us at bpms.pts@gmail.com