



VOLUSIA PINES
PTA MEMBERSHIP FORM
2020-2021



NAME : _____

ADDRESS : _____

PHONE # _____ E-MAIL _____

STUDENTS NAME: _____

STUDENTS TEACHER _____ GRADE : _____

ADDITIONAL STUDENT : _____

STUDENTS TEACHER : _____ GRADE _____

ADDITIONAL STUDENT : _____

STUDENTS TEACHER : _____ GRADE : _____

****ANY ADDITIONAL STUDENTS LIST ON BACK PLEASE ****

RELATIONSHIP TO STUDENT: CIRCLE ONE PLEASE:

MOTHER FATHER GRANDMOTHER GRANDFATHER AUNT UNCLE

TEACHER / STAFF OTHER: (please specify): _____

INTERESTED IN VOLUNTEERING? YES NO

IS THIS YOUR FIRST TIME BECOMING A PTA MEMBER? YES NO

WHAT IS A GOOD TIME FOR YOU TO ATTEND PTA MEETINGS ? CHECK ONE

____ AFTER SCHOOL 3:00 RIGHT AFTER SCHOOL LETS OUT OR

____ EVENING AROUND 5:30

***Would like to see what works out for our PTA members this way you stay informed of events/information taking place with-in the school and so we can have your ideas and opinions heard as well. ***

TYPE OF PAYMENT:

CASH (AMOUNT) _____ CHECK # _____ CREDIT CARD _____

*** PLEASE NOTE IN AN EVENT OF A CHECK BEING BOUNCED YOU WILL BE NOTIFIED & CHARGED THE BOUNCED FEE AMOUNT OF \$15.00***