Hodgkins
LEADERSHIP ACADEMY

PTO MEMBERSHIP APPLICATION

PTO Welcomes you as a member! Please complete the form below.
(Members of the same household may use one form)

Primary Role: □Parent/Guardian □Teacher/Staff □Community Member □Student □Other

Name_____
Name_____
Address: _____
Home Phone:_____ Mobile Phone:_____
Email address:_____
Student's name: _____ Grade: _____
Student's name: _____ Grade: _____
Student's name: _____ Grade: _____

□I am interested in volunteering for PTO activities. Please send me information on how I can participate!
What is the best way to contact you?:_____

□ I am interested in joining a committee
□Administration: duties include planning out meeting agenda, heading up meetings, working with all other teams
□Budget: duties include tracking of all incoming and outgoing funds, receiving invoice and receipts for any and all payments made
□Communications: duties include sending out meeting info via text and email, create flyers for upcoming events, provide event info for school communications
□Decoration: duties include setup and/or breakdown of PTO events
□Events: duties include planning and coordinating of all PTO events
□Fundraiser: duties include planning, coordinating, and acting as head of PTO fundraising

PAYMENT INFORMATION: Annual Membership dues:
Please pay with cash or check made payable to Hodgkins Elementary School PTO
□ One adult $5 □ Two adults $10

Please place this completed form with payment in the PTO mailbox. Thanks you

FOR MORE INFORMATION CONTACT: HodgkinsPTO@gmail.com