

**PGMS PTSA
MEMBERSHIP FORM
2009 – 2010**

Name _____

Phone Number Home _____ Cell _____

Other Phone _____

E-mail Address _____

Student's Name(s) & Grade(s) _____

Check all that apply:

_____ I want to be a Member. Membership* is \$10.00 per Adult.

*Your Membership includes a PGMS Family Directory

_____ I do not wish to join but would like to be listed in the Directory
(directory may be purchased for \$5.00)

_____ Place a Business Card ad in the Directory - \$20.00 additional
Attach your business card to this form

_____ Enclosed is my tax deductible donation of \$_____ to help
support the valuable work of the PTSA.

Purchases: Membership(s)_____ Ad:_____ Directory:_____

Total enclosed \$ _____

Cash _____ Check No. _____

Please make checks payable to PGMS PTSA.

You are also welcome to drop payment off at the Middle School office at a later date.

JOIN PTSA – TODAY