

## Friendship Elementary PTA

*Dues are \$6.00 per member*

Parent's Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

**Total Dues Paid \$** \_\_\_\_\_

*Please list your children who attend Friendship Elementary and their teachers:*

Student \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Student \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Student \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Student \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

*Thank you for your support!*

*Please print and complete this form then enclose it and your payment in an envelope. You may send it with your child to give to his/her teacher, who will then forward it to the PTA, or you may drop it off to the front office personnel.*