FIRST INDIVIDUAL MEMBERSHIP (1 VOTE) .............................................................................................. $20.00

ADDITIONAL FAMILY MEMBERSHIP (1 VOTE) ...................................................................................... $20.00

SPONSOR A TEACHER MEMBERSHIIP (OPTIONAL).

Teacher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ................................................................ $20.00

Teacher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ................................................................ $20.00

Teacher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ................................................................ $20.00

SPONSOR AN EVENT (OPTIONAL)

Family Bowling \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ………………....................................... $1,200.00

Muffins with Mom \_\_\_\_\_\_\_\_\_\_\_\_ ................................................................ $ 500.00

Teacher Appreciation Week: Lunch \_\_\_\_\_\_\_\_ ............................................................... $ 500.00

Teacher Appreciation Week: Massage ………………………………………… $ 1,000.00

Additional Donation Toward PTA Events & Supplies ………………………........................ $\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parents Gala, Spring Fling, Teacher Appreciation Week, etc)

TOTAL ............................................................... $\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRICING** **–** **CHECK** **ONE** **OR** **MORE** **BOXES:**

**Student** **Information**

Student Name Grade Teacher Name

Student Name Grade Teacher Name

Student Name Grade Teacher Name

Student Name Grade Teacher Name

**Parent** **Information**

Yes No

Name(s): Interested in Volunteering? Email (required)

Mobile # for Text message event reminders (optional)

( )

**Mailing** **Address**

Street

City State Zip code

Please show your support by becoming a member today!

Complete this form or signup online at**HISPTA.com**



**We accept Cash, Checks or Venmo. Please** **make** **checks** **out** **to** **HENDERSON** **INTL** **SCHOOL** **PTA, or Venmo Payment to HIS PTA 2019. All donations are tax deductible. Thank you!**

Payment Method: Check # \_\_\_\_\_\_\_\_\_\_ Credit Card \_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

THANK YOU FOR SUPPORTING THE PTA. YOUR MEMBERSHIP DUES ALONG WITH MONETARY

DONATIONS HELP SUPPORT STUDENT EVENTS.

2019-2020 Membership Form

We are committed to making every child’s potential a reality by engaging and empowering families and communities to advocate for all children. You can help us

reach our goal in this community by becoming a member. Please fill out the form below and return to us with your membership dues. Your dues go toward

funding our programs and advocacy efforts, as well as the advocacy work that our State and National PTA carries out on behalf of *all* children.