

Mandeville High Parent, Teacher, and Student Association (PTSA)

Fall 2018 Membership Drive

Student's Name: _____ (please print)

Homeroom Teacher: _____ (please print)

Please **clearly print** the member's name for each card and circle the appropriate membership category. Only one name per membership card. Business members list two names and an email address and receive two cards plus one free ad in a fall 2018 Skipper Scoop. **Email address is voluntary for all individual membership cards.

1. Name: _____

Mother / Father / Student / Grandparent / Teacher / Administration / Staff / Business / Alumni

Email address: _____

2. Name: _____

Mother / Father / Student / Grandparent / Teacher / Administration / Staff / Business / Alumni

Email address: _____

3. Name: _____

Mother / Father / Student / Grandparent / Teacher / Administration / Staff / Business / Alumni

Email address: _____

4. Name: _____

Mother / Father / Student / Grandparent / Teacher / Administration / Staff / Business / Alumni

Email address: _____

\$10.00 Each Individual Membership X _____ membership(s) = \$ _____

\$20.00 Each Business Membership X _____ membership(s) = \$ _____