

West Vincent Elementary School 2011- 2012 Membership Form



1st Member's Name _____
Address _____
City _____ Zip _____
Home Phone _____ Cell Phone _____
E-mail Address _____
Would you like to receive our WVES PTA weekly email newsletter? Y N

2nd Member's Name _____
Address _____
City _____ Zip _____
Home Phone _____ Cell Phone _____
E-mail Address _____
Would you like to receive our WVES PTA weekly email newsletter? Y N

Child's Name Teacher/Grade

- 1. _____
- 2. _____
- 3. _____
- 4. _____

2011-2012 WVES PTA Membership Dues **\$6.00 each** \$ _____
Donation to Unfundraiser - Do you need a tax receipt? **Y / N** \$ _____
Please make checks payable to WVES PTA **Total Amount** \$ _____
Please include phone number and child's name on check.

(There will be a \$25 fee for all returned checks.)

NEW Sign up for the WV PTA Directory by going to:
www.westvincentpta.org/

*PTA use only: \$ Rec'd by _____ Date rec'd ____/____/____

Ck # _____ Total rec'd \$ _____ Card Issued ____/____/____