

SCHOOL NO. 5 PTA MEMBERSHIP DUES

\$10.00 PER PERSON*

Please Print (include all names of children attending School No. 5):

Parent's Name: _____

Student(s) Name and Teacher: _____

Student(s) Name and Teacher: _____

Student(s) Name and Teacher: _____

Student(s) Name and Teacher: _____

*If paying by check, please make check payable to: School #5 PTA

