



2018-19 PTA Membership Application

- ☐ Family Membership (2 parents/guardians) \$20.00 \$ _____
- ☐ Single Membership (1 parent/guardian) \$15.00 \$ _____
- ☐ Teacher/Staff Membership \$ 8.00 \$ _____
- ☐ Tax Deductible Donation to support programs at GES \$ _____
Only add'l donation is tax deductible and does NOT include membership dues.
- Total Amount** (Make checks payable to "GES PTA") \$ _____

Last Name (Parent/Guardian 1):	First Name:	Primary Phone Number
Email:		
Last Name (Parent/Guardian 2):	First Name:	Primary Phone Number
Email:		
Child's Name:	Grade:	Teacher:
Child's Name:	Grade:	Teacher:
Child's Name:	Grade:	Teacher:

☐ Check here to have your information above included in the PTA Grade Lists/Listserv

For office use only:

Paid by: ☐ Cash ☐ Check # _____ ☐ PayPal Order # _____ ☐ Credit Card Type _____

Ticket # _____