



Seven Oaks Elementary
PTA[®]
everychild.one voice.[®]

2017-2018 MEMBERSHIP FORM

Date: _____

Please Check: Parent/Guardian ____ Grandparent ____ New Member ____ Returning Member ____

Member Name: (Please list Mr. or Ms.) _____

Member #2 (Spouse) if joining as family: (Mr. or Ms.) _____

Email: _____ Phone/Cell: _____

Student: _____

Student: _____

Grade: _____ Teacher: _____

Grade: _____ Teacher: _____

Dues are \$10 for one adult, \$15 for family (2 adults)

** Students do not join*

With 1 adult membership, you are entitled to 1 vote and with family membership, you are entitled to 2 votes at our General Membership Meetings. Although there are **no mandatory meetings**, we invite members to join us at our General Membership Meetings so that they can have a voice in what the PTA is doing to better their child's education. By joining the PTA, **you are not obligating yourself to anything.** You are simply helping the PTA advocate for our children and our school.

PTA Members (and their students) enjoy \$1.00 off all SOES Spirit Wear and discounted admission to select PTA sponsored events throughout the year!

Would you be interested in any volunteer opportunities? Y _____ N _____

If yes, how would you prefer to be contacted? Please circle. Email _____ Phone _____

Please return this form with cash or check (payable to SOES PTA) to school with your child.

For PTA Use Only

Payment:		Membership Type:	Membership Card Issued? Y ____ N ____
Check# _____	Amount _____	Individual ____	Phone # and address on check? Y ____ N ____
Cash \$ _____	Rec'd by _____	Family ____	Interest in board position/ info? Y ____ N ____
Credit Card _____		Grandparent ____	



Text #: 81010
 School Code: @pta2017201

