



Return in person or via your child to the PTA mailbox in the front office

# Bay Point Elementary Magnet PTA Membership Form

Please enclose \$6 per person

Name (#1) \_\_\_\_\_ Name (#2) \_\_\_\_\_

Parent ( ) Staff ( ) Other ( ) \_\_\_\_\_ Parent ( ) Staff ( ) Other ( ) \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone (# 1) \_\_\_\_\_ Cell Phone (# 2) \_\_\_\_\_

Email Address (es) \_\_\_\_\_ / \_\_\_\_\_

Contact preference (# 1): (1-5) Email \_\_\_ Mail (if available) \_\_\_ Home Phone \_\_\_ Cell Phone \_\_\_ Text \_\_\_

Contact preference (# 2): (1-5) Email \_\_\_ Mail (if available) \_\_\_ Home Phone \_\_\_ Cell Phone \_\_\_ Text \_\_\_

Student's Name \_\_\_\_\_ Student's Grade and Teacher \_\_\_\_\_

Student's Name \_\_\_\_\_ Student's Grade and Teacher \_\_\_\_\_

Student's Name \_\_\_\_\_ Student's Grade and Teacher \_\_\_\_\_

Just keep me informed \_\_\_ or I'm interested in helping with \_\_\_\_\_

Membership/Treasurer Use: Date \_\_\_\_\_ Amt \_\_\_\_\_ Cash ( ) Check (# \_\_\_\_\_) Card #s \_\_\_\_\_ Delivered \_\_\_\_\_



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