

Truman Patriots Club PTSA Membership Application

All memberships are \$10

Name _____ Student Name _____ Grade _____

Business Name (if applicable) _____

Address _____ City, State & Zip _____

Contact Phone Number _____ Email _____

Return to: **Truman Patriots Club PTSA**, Truman High School, 3301 S. Noland Road, Independence, MO 64055
*If you would like to pay via PayPal, please email this completed form to trumanpatriotsclub@yahoo.com and you will be sent a PayPal link.

Total Paid: \$ _____	_____ Cash	_____ Credit Card *
	_____ Check (check # _____)	

**“Thank you” for supporting the
Truman Patriots Club PTSA.**

