



**Elkins High School Athletic Booster Club
Membership Form
2019-2020**

Date _____

Member Information

Name: _____

Mobile/Cell Phone: _____

Email Address: _____ @ _____

*EHS ABC will use this cell and email address for update and information notifications.

Student Athlete Name _____ Grade _____ Sport _____

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Membership Selection

_____ **Blue Knight \$35** – Scholarship Eligibility

_____ **Gold Knight \$50** – Scholarship Eligibility & \$5 Knights Spirit Wear Merchandise Voucher

_____ **Sir Knight \$100** – Scholarship Eligibility & \$10 Knights Spirit Wear Merchandise Voucher

Team Specific Donation:

Add an additional team donation amount here. This donation will go to the team specified.

Amount of Donation \$ _____ Specific Team/ Sport _____

Faculty Membership:

_____ **EHS Faculty \$15** Area/Subject: _____ Room #: _____

***Corporate Sponsorships and Faculty Membership are available. Please see our Website ELKINSATHLETICBOOSTERCLUB.COM*

*** EHS Athletic Booster Club is a 501(c)3 organization. Receipts available upon request.*

Make checks payable to **Elkins Athletic Booster Club**

Elkins Athletic Booster Club
6140 Hwy 6 #132
Missouri City, TX 77459
ELKINSATHLETICBOOSTERCLUB.COM