

## 2018-2019 Membership Application

Dues are \$11.50 per person.
Include cash or make check payable to:

<u>Tualatin Elementary PTA</u>

Member Name			
Address			
City		State	Zip
Preferred phone			
Email			
		Teacher ommunity Member	School Staff
Please list names of	your students and the	ir teachers at this schoo	ıl:
Student's name			Teacher
Student's name		·	Teacher
Student's name			Teacher
Student's name			Teacher
Your membershi	is registered with the	a 501(c)(3) not-for-profit o Oregon Department of Jus eductible as a charitable o tualatinpta(	stice.
For unit use:			
Date received	Amount received	Cash	_ or Check #
Entered to roster	by	Remittance form date	and #

Check # \_\_\_\_\_

Remittance sent to Oregon PTA Date: \_\_\_\_\_