



Member of



BARCLAY BROOK-BROOKSIDE PTA MEMBERSHIP FORM

Please print clearly

PARENT NAME (S): _____

PHONE #: _____

E-MAIL: _____

(Requested for timely notification of PTA news & events.)

Child 1:

First Name _____ Last Name: _____

School: _____ Grade: _____

Teacher's Name: _____

Child 2:

First Name _____ Last Name: _____

School: _____ Grade: _____

Teacher's Name: _____

Child 3:

First Name _____ Last Name: _____

School: _____ Grade: _____

Teacher's Name: _____

Annual dues:

Individual Membership: \$10.00

2 Adults (Family Membership): \$15.00

Amount enclosed: \$ _____

Please make checks payable to: **BB/BS PTA**

If you have any questions, or require further information,
please contact Alyssa Dunn at adunnbbbspta@gmail.com.