



**Join the PTA today & be an advocate for LES students and our school!**

Your PTA membership has a direct impact on the students and the quality of our school. The PTA has the ability to help make school a better place for children to learn, by providing financial and other resources to our teachers and staff, and programs and events for our students and families. By becoming a PTA member, you can help identify the needs of the school and develop solutions that include advocating for student needs, and bringing enriched educational opportunities to the school.

**You may also join online through MemberHub. See [www.lespta.com](http://www.lespta.com) for details.**

**Member Information** (PLEASE PRINT CLEARLY)

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

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

\_\_\_\_\_ Parents: *By initialing here, I am giving permission for my child(ren)'s photo, image or likeness to be published on the LES PTA web site, MemberHub, and other publications or sites as deemed appropriate by the PTA. This does NOT include any personal information (name, etc.).*

**2<sup>nd</sup> MEMBER INFORMATION** (PLEASE PRINT CLEARLY)

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

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

**Student Information** (PLEASE PRINT CLEARLY)

<i>First name</i>	<i>Last Name</i>	<i>Grade</i>	<i>Teacher</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Membership Fees and Donations:**

Questions? Contact us at [info@lespta.com](mailto:info@lespta.com)

Number of parent/guardian/other memberships: \_\_\_\_\_ x \$10 per person = \$ \_\_\_\_\_

Number of faculty/staff memberships: \_\_\_\_\_ x \$6 per person = \$ \_\_\_\_\_

**Additional Tax Deductible Donation (optional):**

*100% of your donation stays at our school!*

\$10 \_\_\_\_\_ \$20 \_\_\_\_\_ \$30 \_\_\_\_\_ \$40 \_\_\_\_\_ \$50 \_\_\_\_\_ \$100 \_\_\_\_\_ Other: \_\_\_\_\_

**Total (Membership Fees + Donation) = \$ \_\_\_\_\_**

Please make checks payable to: LES PTA  
There will be a \$25 returned check fee.

**Office Use:**

Date rec'd: \_\_\_\_\_ Amount: \_\_\_\_\_ Paid by: Cash \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card reader \_\_\_\_\_  
Form rec'd at (check one): Meet the teacher \_\_\_\_\_ Open house \_\_\_\_\_ Mail bin \_\_\_\_\_ Other \_\_\_\_\_ / Entered in MH: \_\_\_\_\_