

Warm Springs / James Leitch PTO

MEMBERSHIP 2007-2008

Please Print Clearly — Return to your child's teacher

Dues are \$10.00 per person or \$40.00 per family.

Please make check payable to **JL/WS PTO**

P=Parent; S=Student; T=Teacher

PTO MEMBER NAMES:

1. _____ P() S() T()

2. _____ P() S() T()

3. _____ P() S() T()

4. _____ P() S() T()

Number of Members x \$10.00 = _____

or

Family Membership (\$40.00) = _____

Additional Donation: _____

TOTAL PAID: _____

CONTACT INFORMATION:

Student Name: _____ Teacher: _____ Grade: _____

Student Name: _____ Teacher: _____ Grade: _____

Student Name: _____ Teacher: _____ Grade: _____

Parent/Guardian Name(s): _____

Address: _____

Phone: _____ email: _____

For office use only:

Check #	Amt.	Deposit Date:
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