

AVHS PARENT TEACHER STUDENT ASSOCIATION (PTSA) MEMBERSHIP FORM & DIRECTORY LISTING 2008-2009

WE INVITE ALL PARENTS AND STUDENTS TO JOIN THE PTSA TO SUPPORT AVHS!

The primary PTSA membership is \$15.00, and includes one student directory that will be mailed to you. Each additional membership in the same family is \$5.00. Extra directories may be purchased for \$5.00 each. *At least one family member must join PTSA in order for student to be listed in the directory.*

LIST HERE ONLY THOSE WISHING TO JOIN THE PTSA – one name per line

	Last Name	First Name	Circle One Please	Cost
1			Parent/Guardian or Student - ___Grade	\$15.00
2			Parent/Guardian or Student - ___Grade	\$ 5.00
3			Parent/Guardian or Student - ___Grade	\$ 5.00
4			Parent/Guardian or Student - ___Grade	\$ 5.00

Membership Dues (can be deducted from your tax return)

_____ Membership (includes one directory) @ \$15.00 = \$ 15.00
 _____ Additional Membership(s) @ \$ 5.00 each = \$ _____
 _____ Additional Directories @ \$ 5.00 each = \$ _____



TOTAL AMOUNT DUE: \$ _____ Are you AVHS staff? _____
 (please check here)

Member's names will be given the National PTA as part of their membership records.

Check box if you do NOT wish us to include your address , or email for National PTA records.

STUDENT & PARENT INFORMATION FOR MEMBERSHIP DIRECTORY LISTING

Below is a sample of how the directory will look if all information is included:

Doe, John 555-1234 9 Mary and John Doe 123 Town Street, Pls 94566 jmdoe@attbi.com
 555-4321 9 Jane and Mike Jones 321 City Street, Dub, 94599 mjjones@attbi.com

(If a child resides in two households, the information will be listed as above. One or both parents can send in a form.)

Your address is **required** for mail delivery of the directory even if you do not want it listed

CHOOSE WHICH INFORMATION YOU WANT LISTED IN THE DIRECTORY. IF YOU DO NOT WANT IT INCLUDED IN THE DIRECTORY, THEN CIRCLE NO TO THE RIGHT OF THAT INFORMATION.

(If every no is circled your student's name will not be listed in the directory, but you will be sent one)

Student Name: _____ Grade: _____
 Student Name: _____ Grade: _____
 Student Name: _____ Grade: _____

REQUIRED Address: _____ NO
 (For mailing directory) City: _____ Zip: _____
 Phone: _____ NO
 Parent/Guardian Name(s): _____ NO
 Parent's E-Mail: _____ NO

If a child lives in two residences and you want them both listed in the directory, fill in the information below:
ONLY FILL IN THE INFORMATION YOU WANT LISTED IN THE DIRECTORY - DO NOT DUPLICATE INFO FROM ABOVE:

Address _____
 City: _____ Zip: _____ Phone: _____
 Parents/Guardian Names: _____ Parent's E-Mail: _____

Please return form with payment to PTSA table at "walk-through" registration or mail to PO Box 37, 94566.
Contact Laurel Stjern at 352-5544 or lstjern@wfbm.com if you have any questions about the directory.

DEADLINE FOR LISTING INFORMATION IN THE DIRECTORY – SEPTEMBER 19, 2008