



LMHS PTSA GENERAL MEMBERSHIP FORM

PLEASE PRINT CLEARLY

STUDENT NAME: _____

GRADE: _____ **PHONE:** _____

ENGLISH TEACHER/CLASS PERIOD: _____

Please indicate type of member (parent, student include grade, teacher, staff, grandparent, etc.)

NAME(S) OF MEMBER:

TYPE/GRADE

ADD'L CONTRIBUTION \$ _____

NUMBER OF MEMBERSHIPS
_____ @ \$7.00 ea. \$ _____

TOTAL AMOUNT ENCLOSED \$ _____
(Cash or Check)

Make Checks Payable to: LMHS PTSA
(Place in an envelope marked "PTSA" and return to teacher/front office)

PTSA INFORMATION EMAILS and VOLUNTEER OPPORTUNITIES: Interested in receiving information from PTSA (General Meeting dates/times, Programs/Events, etc.) or helping throughout the year with baked good/food items, gift certificates, etc., please include your

EMAIL: _____

THANK YOU FOR YOUR SUPPORT!