## Membership Form Student

PTSA everychild. one voice.

n <u>Please</u>	<u>Check C</u>	<u>ne</u>
Student Membe	ership \$4	
Parent Membe	ership \$6	
Staff Membe	ership \$6	
Community Member	ership \$6	
Additional Family Me	mber \$4	

New this year: **All membership cards will be sent by email.** Text and email blasts will be sent with reminders of PTSA meetings the week of the meetings. Email blasts alone will be used for additional information and **will not be sent excessively**.

Name		
Additional Family <i>N</i>	lember (discounte	d)
Parents: Grade(s) are	your children in	Students: Your Grade
Staff Members: Depar	tment	
Street Address		
Town & ZIP	Phone	Cell Phone
EMAIL (Required) _		
In addition to you	membership, would	you like to make a DONATION to the FHS PTSA
Membership Total	\$	Donation Amount \$
All D	ONATIONS are tay de	Total Enclosed \$

- Please make out checks to: FRONTIER HIGH SCHOOL PTSA
- Bring your completed membership form and payment to any FHS PTSA meeting, FHS Open House, FHS Main Office in an envelope labeled: PTSA MEMBERSHIP CHAIR or mail to:

PTSA MEMBERSHIP CHAIR FRONTIER HIGH SCHOOL PTSA 4432 BAYVIEW RD HAMBURG, NY 14075

## Thank you!

Any individual interested in the purposes of the PTSA may join, including students, staff and family and community members. Check out the PTA section of the Frontier High School website for meeting dates and information on SpiritWear, Scholarships and other information.