



SUPPORT your student... GET CONNECTED to your school.

JOIN YOUR PTA!

Our Vision: That every child's potential becomes a reality.

Our Mission: To make every child's potential a reality by engaging and empowering families and communities to advocate for all children.

2019 – 2020 James W. Alexander PTA Membership

Individual Dues Amount \$6.00

Household Members

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

Email address: _____

Phone Number: _____

Student Information

First Name: _____ Last Name: _____

Grade: _____ Teacher: _____

First Name: _____ Last Name: _____

Grade: _____ Teacher: _____

First Name: _____ Last Name: _____

Grade: _____ Teacher: _____

First Name: _____ Last Name: _____

Grade: _____ Teacher: _____

Amount enclosed: \$6.00 x _____ members + \$ _____ additional donation = \$ _____

Please complete the form and return it along with your \$6.00 per person annual dues to the attention of PTA Membership. If submitting a check please make payable to James W. Alexander PTA. In an effort to "Go Green" all membership cards will be sent directly to you via your email address.

PTA Use Only

Payment Information

Date: _____ Amount _____

Payment: Cash _____ Check _____

Membership Database

Date Entered: _____

Entered By: _____