2017-2018

1 st Member's name:						\$15.00
E-mail:			(circ	le: Parent,	Staff, othe	r)
Addt'l Member's name:						\$10.00
E-mail:			(circ	le: Parent,	Staff, othe	r)
Addt'l Member's name:						\$10.00
E-mail:			(circ	le: Parent,	Staff, othe	r)
Phone:						_
Name of student(s) and grad	e(s): _					
Subtotal - Membership Dues:						- \$
In addition to my membership du	es I wo	uld like	to dona	te to the foll	owing progra	ams:
Scholarship Funds:	\$10	\$20	\$100	or <i>other</i>	\$	_
High 5 Club (students in need):	\$10	\$20	\$100	or <i>other</i>	\$	_
Sober Grad:	\$10	\$20	\$100	or other	\$	_
General/Undesignated:	\$10	\$20	\$100	or other	\$	
Subtotal - Additional Donations:						\$
Please make checks paya	ble to	PGH.	S PTA.	Total en	closed: \$_	

Are you interested in volunteering for PTA events? YES NO

Please note that in order for your student to qualify for PTA Scholarships you must become a member of the PTA.

PTA will publicize your name as a member on our website; no other personal information will be shared or published.