

## Baker Middle School PTA 2009/2010 Membership Form

Please complete information below and return it with payment to Baker Middle School. (Your child can drop it off at the office on the way into school.) Your membership card and directory will be provided to you in the coming weeks. **Thank you very much for your support!**

Parent Name \_\_\_\_\_ Parent Name.  
\_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Children at Baker Middle School 1st period Teacher (if known)

Child's name \_\_\_\_\_ Teacher \_\_\_\_\_

Child's name \_\_\_\_\_ Teacher \_\_\_\_\_

Child's name \_\_\_\_\_ Teacher \_\_\_\_\_

I do not wish to be included in the PTA Directory \_\_\_\_\_ (Initial)\*\*

\*\*All PTA members are listed in the PTA Directory unless indicated otherwise.

Membership dues = \$15.00 per person # of memberships (x \$15) \_\_\_\_\_

Amount/Method of payment: Cash \_\_\_\_\_ Check \_\_\_\_\_ (payable to Baker PTA)