



DATE PAID \_\_\_\_\_

CHECK # \_\_\_\_\_ OR CASH \_\_\_\_\_

## 2008 - 2009 Membership and Directory Form

-- PLEASE PRINT CLEARLY! --

Please return this form and payment to the PTA desk on registration day, or through your child's teacher.  
**If you wish to be included in the 2008-2009 Directory, this form must be returned by Friday, September 12.**

**MEMBERSHIP INFORMATION**     FAMILY (\$10)    **OR**     FACULTY/STAFF (\$5)

\_\_\_\_\_  
Faculty/Staff Member *or* Primary Family Parent/Guardian (full name)

\_\_\_\_\_  
Additional Parent/Guardian - Optional (full name)

\_\_\_\_\_  
Address (include street or P.O. box and name of town)

\_\_\_\_\_  
Phone number (one per household)

\_\_\_\_\_  
E-mail address (optional)

By providing an e-mail address on this form, you are agreeing to receive occasional correspondence from the National PTA, to keep members up to date on national issues that affect children and education, as well as communicating membership benefits. You may select "Unsubscribe" on any PTA newsletter to be removed from the distribution list.

Please list only children in the Amherst School System who are in grades K-8:

\_\_\_\_\_  
Child (first name, last name, grade, teacher name)

\_\_\_\_\_  
Child (first name, last name, grade, teacher name)

\_\_\_\_\_  
Child (first name, last name, grade, teacher name)

\_\_\_\_\_  
Child (first name, last name, grade, teacher name)

Please list additional children on the reverse side of this form.

**DIRECTORY INFORMATION** (Check information to be listed - please note options)

- Children's names and grades
- Parent(s) names or individual member name
- Address
- Phone number \_\_\_\_\_

**OR**     **All of the above**

**Do not include me/my family** in the 2008-2009 PTA Directory

\_\_\_\_\_  
**Signature of parent/guardian**

(A signature is **REQUIRED** for a family to be listed in the PTA Directory)