

Office Use Only
Membership ID#

The Arts & Technology
Parent - Teacher Organization (PTO)
"I am the 1st Teacher"
Membership Application

I am (please check one) Parent Guardian Other (please describe): _____

First Name	Last Name
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I prefer to be contacted by mail by phone by email

Home Address	City/State/Zip
Home Phone	Cell Phone
Fax	Email
I prefer meeting in the evening during <input type="checkbox"/> 4-6pm <input type="checkbox"/> 5-7pm <input type="checkbox"/> 6-8pm <input type="checkbox"/> Other _____	
I am available to meet on the following days <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs. <input type="checkbox"/> Fri.	

Child's Name	Gender	Age	Grade in 07-08
1)			
2)			
3)			
4)			
5)			

- Dues are payable by cash.
- Dues cover a 12-month period from July 1st through June 30th each year.
- By joining the PTO, you consent to be added to our database and receive communication by mail or phone.

Membership Type	Dues
<input type="checkbox"/> Family	\$10
<input type="checkbox"/> Teacher/Supporter	\$10
<input type="checkbox"/> PTO Board Member	\$20