

SPHSPTSO MEMBERSHIP FORM

Money raised by the SPHS PTSO helps *YOUR* child because it is used for tasks that improve the quality of education in our school. Please join the PTSO to offer your child the best learning environment!

Parents' or Guardians' Name(s)

Street Address

City and State

Zip

Phone

E-mail (PTSO preferred method of communication)

Student's First and Last Name

Grade:

Student's First and Last Name

Grade:

Student's First and Last Name

Grade:

Please check one of the following membership options:

____ **Falcon:** Individual/Family Membership **\$100 or more**

____ **Gold:** Individual/Family Membership **\$75**

____ **Blue:** Individual/Family Membership **\$50**

____ **White:** Individual/Family Membership **\$25**

Total Amount Enclosed: _____

PLEASE READ!!!

Provided we have enough volunteers to create and email a PTSO Membership Directory this year, please check below if you DO NOT wish the following information to appear in the directory:

- ____ **DO NOT** publish my address
- ____ **DO NOT** publish my phone number
- ____ **DO NOT** publish my email address

PLEASE MAKE CHECKS PAYABLE TO: SPHS PTSO

Please return ENTIRE page to the PTSO mailbox in the Main Office or mail to: SPHS PTSO, 60 Robinson Rd., Severna Park, MD 21146. If you have any questions or ideas, please call Gwen Douma at 410-315-8089, or email gwen_douma@yahoo.com.