WWP High School South PTSA Membership Application 2014 - 2015 school year

		Sig		· <u>at</u>			
	www.so NEW! nembership						
option*							
MEMBEROUR							
MEMBERSHIP: PLEASE PRINT CLEARLY PLEASE PLEASE							
INDIC. MOTH							
FIRST NAME		LAST NAME		GRADE	FATHER, GUARDIAN, OTHER, TEACHER, STUDENT		
1							
3							
4							
STREET ADDRESS							
CITY, STATE, ZIP							
HOME	PHONE	()					
	SER 1 EMAIL						
	SER 2 EMAIL						
	BER 3 EMAIL BER 4 EMAIL						
	NTEER: I would like bsite for details on com		h the followi	ng PTSA com	ımittees		
`	Grants	,			Bake Sale		
☐ Prom Flower Sales					□ School Board Liaison□ Clothing		
(May/June) □					☐ Hospitality		
PAYME	NT:						
Please make checks payable to WWP HSS PTSA Number					r TOT/	AL AMOUNT	
Number of Members @ \$6 per person:					\$	\$	
Of this amount, \$4.00 goes to National and State PTA dues.							
Contribution to Scholarship Fund (Optional, but very much appreciated)					· —		
TOTAL Cash Check#					\$		

Mail this form and your payment to WWP HSS PTSA, 346 Clarksville Road, Princeton Junction, NJ 08550, or bring it to the PTSA mailbox in the school's main office. *Note: merchandise sold on the membership registration website is NOT PTSA-sponsored.