

TACKAN ELEMENTARY SCHOOL PTA MEMBERSHIP FORM

Your Name _____

Additional Paying Member's Name _____

For PTA Use Only
Card # _____
Card# _____

Please list all children who attend Tackan:

Child's Name:

Grade:

Teacher:

Full Address: _____

Phone Number: _____

E-Mail Address _____

The fee is \$8.00 per member. Please make checks payable to "Tackan Elementary School PTA". Return in envelope to PTA mailbox marked "PTA Membership".