

2021-2022 Membership Form

Please support our teachers and students!

**Dues are: \$7 - adult \$5 - child
 \$20 for a family of 4
 \$25 for 5+**

Member 1 Name: _____	Member 2 Name: _____	Member 3 Name: _____	Member 4 Name: _____	<i>Please list all students that attend Clinton Street Elementary:</i> Name: _____ Grade: K 1 2 3 4 Teacher _____ Name: _____ Grade: K 1 2 3 4 Teacher _____ Name: _____ Grade: K 1 2 3 4 Teacher _____ Name: _____ Grade: K 1 2 3 4 Teacher _____
Address: _____ _____, NY 142_____	Address: __ same as first _____ _____, NY 142_____	Address: __ same as first _____ _____, NY 142_____	Address: __ same as first _____ _____, NY 142_____	
Email: _____ _____@_____	Email: _____ _____@_____	Email: _____ _____@_____	Email: _____ _____@_____	
Cell Phone: () _____ - _____	Cell Phone: () _____ - _____	Cell Phone: () _____ - _____	Cell Phone: () _____ - _____	
Home Phone: () _____ - _____	Home Phone: () _____ - _____	Home Phone: () _____ - _____	Home Phone: () _____ - _____	
__ Mother __ Father __ Child	__ Mother __ Father __ Child	__ Mother __ Father __ Child	__ Mother __ Father __ Child	
__ Grandparent __ Teacher/Staff __ Friend/Neighbor __ Other: _____	__ Grandparent __ Teacher/Staff __ Friend/Neighbor __ Other: _____	__ Grandparent __ Teacher/Staff __ Friend/Neighbor __ Other: _____	__ Grandparent __ Teacher/Staff __ Friend/Neighbor __ Other: _____	
___ I would like to volunteer	___ I would like to volunteer	___ I would like to volunteer	___ I would like to volunteer	

Office Use Only:

• **Date** _____ **Payment Method:** __ Cash __ Check# _____ **Total \$** _____ **Initials:** _____

..... adults x \$7 = \$ _____ child(ren) x \$5 = \$ _____ \$20 Family of 4 _____ \$25 5+



search: Clinton Street Elementary PTA