

Tonawanda Central PTSA 2015-2016 Membership & Volunteer Interest

Name:		New Mem #	Home Phone:	
Address:			Mobile Phone:	
City	Zip	Email:		
<input type="checkbox"/> Parent/Guardian	<input type="checkbox"/> Teacher/Staff	<input type="checkbox"/> Relative (Aunt, Grandfather, etc.)	<input type="checkbox"/> Community Member	
Include contact information in PTSA Volunteer Directory? <input type="checkbox"/> Yes <input type="checkbox"/> No		Include email address in PTSA distribution list, to receive newsletters, flyers, updates, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Additional Household Member				
Name:		New Mem #	Mobile Phone:	
Email:				
<input type="checkbox"/> Parent/Guardian	<input type="checkbox"/> Teacher/Staff	<input type="checkbox"/> Relative (Aunt, Grandfather, etc.)	<input type="checkbox"/> Community Member	
Include contact information in PTSA Volunteer Directory? <input type="checkbox"/> Yes <input type="checkbox"/> No		Include email address in PTSA distribution list, to receive newsletters, flyers, updates, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> I grant to Tonawanda Central PTSA the right to take photographs of me and my family. I authorize Tonawanda Central PTSA to use and publish the same in print and/or electronically. I agree that Tonawanda Central PTSA may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, marketing and Web content. <input type="checkbox"/> I do not grant to Tonawanda Central PTSA the right to take photographs of me and my family to use and publish the same in print and/or electronically.				
Parent/Guardian Signature (if over 18):				
Printed name:			Date:	
				New Mem #
Child's Name:	Grade:	Teacher/Room#:		
Child's Name:	Grade:	Teacher/Room#:		
Child's Name:	Grade:	Teacher/Room#:		
Child's Name:	Grade:	Teacher/Room#:		

PAYMENT INFORMATION: Please return form/payment to your child's school, in an envelope marked: "PTSA Membership" Please make checks payable to: **Tonawanda Central PTSA**

Adult \$5 each x ____ = _____ Student \$4 each x ____ = _____ Total Dues = _____	Office Use Only Paid by: <input type="checkbox"/> cash <input type="checkbox"/> check(#_____) <input type="checkbox"/> credit
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Volunteer Interest Form

Tonawanda Central PTSA provides many programs and volunteer opportunities. If you are interested in being involved, **please checkmark the events/areas of interest** and you will be contacted for more information. The selection of events listed is subject to change throughout the school year.

Preferred Buildings: Mullen Riverview Fletcher Middle School High School

General Help Any Making Copies Phone Calls
 Child Care at PTSA meetings Monthly Bulletin Board Publicity

Events Any Halloween Party/Fall Festival Picture Day
 3rd Grade Picnic Honor Roll Breakfast Red Ribbon Week
 Coffee, Tea & Someone Ice Cream Social(s) Sports Night(s)
 Special to Me Leadership Day Staff Appreciation Week
 Craft Night(s) Literacy Night Talent Show(s)
 Earth Spirit Day Movie Night(s) Turkey Trot
 Family Game Night(s) Membership Drive Valentine's Celebration
 Field Day Moving Up Day Winterfest
 Flag Day Open House Winter Dance(s)
 Grandparents Night PARP Week Winter Holiday Festival/Bash

Events & Activity Positions Any Committee Member (Event Planners & Coordinators) Food, Snacks & Refreshments Server and/or Cashier
 Arts & Crafts Tables Event Clean-Up Crew Games
 Committee Chair (Event Supervisor) Event Decorators Sports & Activities

Fundraising Any Box Tops For Education Mother's Day Gift Sale
 Bake Sale(s) Campbell's Labels Collection Restaurant Fundraisers
 Book Fair(s) Event Concessions Stand Santa's Secret Workshop
 Bottle Drive Father's Day Gift Sale T-Shirt Sales

Donations Any Food Drive
 Clothing Drive Senior Scholarships

Other talents or service you think would be helpful?
