

James Bowie PTSA Membership Form 2008-2009
\$10.00 per person

Name (first): _____ (last): _____

Membership type Parent

Student: (circle one) Freshman Sophomore Junior Senior

Community Member

Faculty/Staff (position): _____

I am a Texas PTA Lifetime Member: yes no

Address: _____

City: _____ State: _____ Zip code: _____

Phone (home): _____ (cell): _____

(work): _____ (other): _____

Email: _____

I would like to be contacted about volunteer opportunities at Bowie: yes no

Please email me reminders about PTSA events and meetings: yes no

Additional member (same address):

Name (first): _____ (last): _____

Membership type Parent

Student: (circle one) Freshman Sophomore Junior Senior

Community Member

Faculty/Staff (position): _____

I am a Texas PTA Lifetime Member: yes no

Phone (home): _____ (cell): _____

(work): _____ (other): _____

Email: _____

I would like to be contacted about volunteer opportunities at Bowie: yes no

Please email me reminders about PTSA events and meetings: yes no