



PMA PMMS PTSA Membership Form 2024-25

☐ Parent \$10.00 ☐ Teacher/Staff \$8.00 ☐ Student \$6.00

Please Print

Member: _____ Primary Phone#: _____

☐ Parent ☐ Grandparent ☐ Guardian ☐ Teacher ☐ School Staff ☐ Student

Email: _____ Would you like to be contacted to volunteer? YES NO

Student Name _____ Grade _____ Homeroom/ Advisory # _____

Student Name _____ Grade _____ Homeroom/ Advisory # _____

Student Name _____ Grade _____ Homeroom/ Advisory # _____

Payment:

☐ Cash

☐ Check # _____

Pay by cash, check, or online at <https://join-the-pta-temp-2185.cheddarup.com>.



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