



**PTA MEMBERSHIP FORM
FOR TEACHERS/STAFF**

TEACHER/STAFF NAME: _____ Benjamin ____ Evergreen ____

HOME ADDRESS: _____

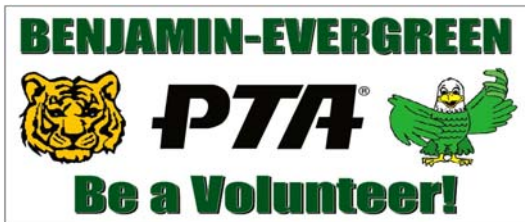
E-MAIL ADDRESS: _____ (Note PTA correspondence will be sent to this e-mail address including the PTA newsletter, unless you indicate otherwise.)

SPOUSE MEMBERSHIP – SPOUSE NAME: _____

One Person: \$5.00 _____ Two People: \$10.00 _____

Cash: _____ Check No: _____ (payable to Benjamin-Evergreen PTA)

Any questions contact Jackie Pearce, PTA Membership Coordinator at 768-7985.



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