

# JOIN THE 2009-10 KLMS PTA!

Please complete ALL of the areas on this form. Part 1 information is needed whether you are new to KLMS or are returning, whether you are joining the PTA or not. The requested information is needed for PTA membership, Student Directory, Phoenix Fund and the Volunteer Bank. *Thank You!*

## **Part 1—General Information**

### **1. Parent/Guardian**

\_\_\_\_\_  
**Last Name** (print clearly)

\_\_\_\_\_  
**First Name** (print clearly)

\_\_\_\_\_  
**Last Name** (print clearly)

\_\_\_\_\_  
**First Name** (print clearly)

<b>2. Student(s)</b>	<b>Last Name</b>	<b>First Name</b>	<b>Team/Focus Teacher</b>	<b>Grade</b>
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**3. Address** \_\_\_\_\_ **4. Telephone and Email** \_\_\_\_\_

Check here if you **DO NOT** want telephone and e-mail address in the directory.

## **Part 2—Student Directory—Check One**

I authorize KLMS PTA to use the above information in the KLMS Student Directory through the end of **my child's last year of enrollment at KLMS**. I understand that this directory is for the use of KLMS families only and is not to be used or released to any other person or organization or for any other purpose.

I do not want my child included in the KLMS Student Directory. I understand that this directory is for the use of KLMS families **only** and is not to be used by or released to any other person or organization or for any other purpose.

**Parent/Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **Part 3—PTA Membership Member Names**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Total \_\_\_\_\_ members x \$6 = \$ \_\_\_\_\_

**Make check payable to KLMS PTA**

### **Part 4—Phoenix Fund**

Our family wishes to contribute to the optional 2009-10 Phoenix Fund at the following level (check one).

\$30     \$50     \$75     Other \$ \_\_\_\_\_

Total Membership— @ \$6 each \$ \_\_\_\_\_

Total Phoenix Fund                    + \$ \_\_\_\_\_

Grand Total                                    = \$ \_\_\_\_\_

**Make check payable to KLMS PTA**

## **Part 5—Volunteering**

I authorize KLMS PTA to contact me in regards to potential volunteer opportunities that come about during the 2009-10 school year.

### **Areas of Interest (check all that apply)**

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Beautification</b> (Assist in landscaping grounds)  | <input type="checkbox"/> <b>Flexible Volunteer</b> (Able to donate 2-3 hours with notice) |
| <input type="checkbox"/> <b>Hospitality</b> (Bake/donate food for faculty/staff events, student functions, and/or PTA programs) | <input type="checkbox"/> <b>Outdoor Lunch</b> (Weather permitting, monitor during lunch)  |