



**2020-2021 PTSA MEMBERSHIP APPLICATION**

*Making A Difference - One Member at a time!*

MEMBERSHIP OPTIONS

PARENT (Mom or Dad): .....each \$40.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

STUDENT: .....each \$20.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

Business: ..... \$50.00 = \$ \_\_\_\_\_

Additional Donation: ..... = \$ \_\_\_\_\_

**TOTAL: \$ \_\_\_\_\_**

Cash \_\_\_\_\_ Credit Card \_\_\_\_\_ Check # \_\_\_\_\_

On-line at: [www.ISPA-PTSA.com](http://www.ISPA-PTSA.com) / Checks payable to "ISPA PTSA"



**Please PRINT CLEARLY**

LAST Name (Paying PARENT): \_\_\_\_\_

FIRST Name (Paying PARENT): \_\_\_\_\_

Home Address: \_\_\_\_\_

Email Address (PARENT): \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_  
HOME OR WORK CELL

Student's Name: \_\_\_\_\_

Grade Level: 9th ( ) 10th ( ) 11th ( ) 12th ( )

ISPA Language Program: SPANISH ( ) FRENCH ( ) ITALIAN ( )

Would you Like to Volunteer? YES ( ) NO ( )

**THANK YOU FOR YOUR SUPPORT!!!!**