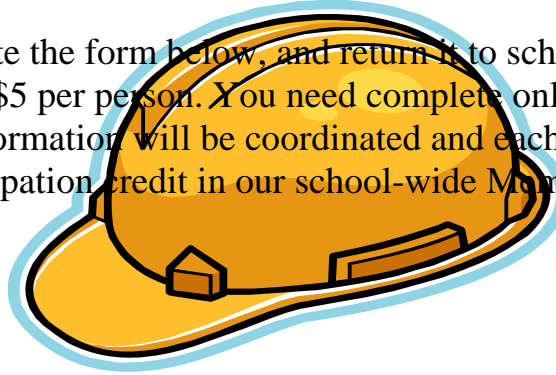


# Macon-Hall PTA Membership

## *Building Futures*

Please complete the form below, and return it to school with your payment. Membership is \$5 per person. You need complete only one form per family—sibling information will be coordinated and each child's class given participation credit in our school-wide Membership Drive.




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(Name)	(Street Address)	(Zip Code)
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(Home Phone)	(Cell Phone)	(email address)
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(Name)	(Street Address)	(Zip Code)
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(Home Phone)	(Cell Phone)	(email address)
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(Name)	(Street Address)	(Zip Code)
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(Home Phone)	(Cell Phone)	(email address)
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(Name)	(Street Address)	(Zip Code)
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(Home Phone)	(Cell Phone)	(email address)
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(Name)	(Street Address)	(Zip Code)
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(Home Phone)	(Cell Phone)	(email address)
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Please list all students enrolled at Macon-Hall

Name (first/last)	Grade	Teacher

# Members: \_\_\_\_\_ Payment: \_\_\_\_\_