

Mandarin Oaks Elementary School PTA Membership

PTA Casting Call
"Play your part" – Join the PTA!

Member's Name: _____

Phone (hm) _____ Phone (wk) _____

E-mail Address: _____

(Check boxes that apply):

parent grandparent faculty community other

Member's Name: _____

Phone (hm) _____ Phone (wk) _____

E-mail Address: _____

(Check boxes that apply):

parent grandparent faculty community other

Membership Dues: \$5 (per adult)

Number of adults: _____ Amount \$ _____

Business: \$ 25.00 / Name of business: _____ \$ _____

Owner/ Manager Name: _____ Phone#: _____

\$\$ Donations Welcome \$ _____

(Please make check payable to MOE PTA) **TOTAL \$** _____

<u>Full Names of Children in this School</u>	<u>Teacher's Name</u>	<u>Grade</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Parent Volunteer Survey: Yes! I would like to help with my time or talent in the following areas.

Hearing/Vision Screening
 Sunshine Math
 School Pictures
 Movie Night
 Great Leaps Program
 Just Call Me

Hospitality
 Book Fair
 Family Fun Fest
 4th & 5th Grade Social
 Cultural Arts