

Check No. _____

Cash _____

GOLDENVIEW MIDDLE SCHOOL

2011-2012

PTSA MEMBERSHIP (\$8.50)

(Please make checks payable to Goldenview PTSA. Thank you.)

Member Last Name: _____

Member First Name: _____

Student(s) Name: _____

Address: _____

City: _____ Preferred Phone Number: _____

Email Address: _____

(Please circle)

Parent

Teacher

Student

\$8.50 Membership _____

Optional donation _____

Total _____