

2009-2010 Glacier Park Elementary PTSA Membership Application

Applicant Information	
1 st Parent/Guardian:	
2 nd Parent/Guardian: (if Signing up for Family Membership)	
Primary E-mail Address:	
Address:	
City:	Zip:
Home Phone: ()	Alternate Phone: ()

Membership Options- Check Desired Option	
	Family Membership Bundle - \$25 (Best Buy) (Includes Family Membership and 1 Yearbook)
	Student Name:
	Grade Level:
	Teacher Name:
	Family Membership - \$16
	Student Name:
	Grade Level:
	Teacher Name:
	Individual Membership -\$10
	Student Name:
	Grade Level:
	Teacher Name:
	Donation- \$ _____
	Student Name:
	Grade Level:
	Teacher Name:

\$12 For Additional Yearbooks			
Student Name	Grade Level	Teacher Name	Sub-Total
			\$
			\$
			\$
			\$

TOTAL AMOUNT DUE	\$
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Make Checks Payable to Glacier Park PTSA and return to Glacier Park Office

PTSA USE ONLY					
Date Processed	Membership\$	Yearbook\$	Donation \$	Other\$	