



2022-2023 Marshdale PTA General Membership Form

Voting Rights | Have Your Voice Heard | Volunteering Welcome, Not Required



Name: _____

Circle all that apply: Parent / Grandparent / Staff / Community Member

Address (include City & Zip):

Home Phone: _____ Cell Phone: _____

Email (must provide to get PTA communication):

Second Member Name: _____

Home Phone: _____ Cell Phone: _____

Email (must provide to get PTA communication): _____

Child's Name _____ Grade _____

Teacher _____

Child's Name _____ Grade _____

Teacher _____

Child's Name _____ Grade _____

Teacher _____

Child's Name _____ Grade _____

Teacher _____



Individual Membership (1 vote) - \$20

Family Membership (2 votes) - \$35

Staff Membership (1 vote) - \$10

Scan the QR code or send cash/check to school with your child.

Please make checks payable to "Marshdale PTA".

Date _____

Amount Paid _____

Cash or Check # _____