



# 2023-2024 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 # \_\_\_\_\_