



J. CRESSWELL STUART ECDC PTA REGISTRATION FORM

Complete the PTA form below to sign up for membership.

PTA's mission is to make every child's potential a reality by engaging and empowering families and communities to advocate for all children.

Full Name :

Full Address :

E-Mail : Child's Name

"ALONE, WE CAN DO SO LITTLE. TOGETHER, WE CAN DO SO MUCH."

Which of the following are you interested in ?

<input type="checkbox"/> Board of Education Representative	<input type="checkbox"/> Dads On Duty
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Parking Lot Patrol
<input type="checkbox"/> Teacher Appreciation	<input type="checkbox"/> Family Fun Nights
<input type="checkbox"/> Room Parent (Contingent upon C-19 Visitation Rules)	<input type="checkbox"/> JCS Health & Wellness Team
<input type="checkbox"/> Events, planning, & outreach	<input type="checkbox"/> Assemblies & Cultural Events
<input type="checkbox"/> Scholastic Book Fair	<input type="checkbox"/> Other(s) <input type="text"/>

Cash With Application :

Payment Method : Annual

Membership Level (A)

Annual Membership Fee \$10.00
Return your registration form and cash to your child's teacher. (No checks at this time please.) Thank you for your support.



PTA Membership Fee Collected By: _____ Date: _____