

# Tonawanda Central PTSA Membership/Volunteer Form

**Tonawanda Central**
**PTSA<sup>®</sup>**
*everychild.one voice.<sup>®</sup>*
**Household Information**

Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Home Phone # \_\_\_\_\_  
 Mobile Phone # \_\_\_\_\_

**PAYMENT INFORMATION**

Please return form/payment to your child's school, in an envelope marked: **PTSA Membership**

Please make checks payable to:  
**Tonawanda Central PTSA**

Adult Member Name	Parent/Guardian, Grandparent, Teacher/Staff, Other	Purchase Membership? Y/N	Annual Dues: Adult \$5 Student \$4	Office Use Only Member #
1.				
Email Address:				
2.				
E mail Address:				
Student Member Name*	Grade/Teacher/School*			
1.				
2.				
3.				
4.				

\*Required. Membership card may be sent home in student's backpack.

Total: \_\_\_\_\_

## Interested in Volunteering?

\_\_\_Yes \_\_\_No If yes, availability: \_\_\_Days \_\_\_Evenings \_\_\_Both  
 Preferred Buildings: \_\_\_Mullen \_\_\_Riverview \_\_\_Fletcher \_\_\_Middle School \_\_\_High School

**Chairperson:** Assist by facilitating committee meetings, reporting back to the PTSA Board, event planning and execution.

**Committee Members:** Assist by planning the event and executing the plan. Committees help in organizing and mobilizing volunteers.

**Volunteers:** Assist by executing the plans decided on by the committee.

**Area(s) of Interest:** **Events:** \_\_\_Chairperson \_\_\_Committee Member \_\_\_Volunteer \_\_\_Any

**Fundraisers:** \_\_\_Chairperson \_\_\_Committee Member \_\_\_Volunteer \_\_\_Any

**Dime Donator: No time, just a dime.**

I don't have time, but would like to support the PTSA \_\_\_\$10 \_\_\_\$20 \_\_\_\$30 Other: \$\_\_\_\_

Comments? Questions?

Membership email: [tcptsamembership@gmail.com](mailto:tcptsamembership@gmail.com)

President email: [tcptsapresident@gmail.com](mailto:tcptsapresident@gmail.com)

Office use only Paid: Cash \_\_\_\_\_ Check \_\_\_\_\_ (# \_\_\_\_\_) Money Order \_\_\_\_\_