



We want YOU to join!!  
Stafford Middle School PTA

Parent(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (H) \_\_\_\_\_ (C) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Students(s) Name(s):

\_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_

Membership Types - \$8 per individual or \$12 per family (check box below):

Individual ( 1 Membership) - \$8

Family (2 Memberships...mom/dad) - \$12

Staff - \$8

\$ \_\_\_\_\_

For PTA use:

Cash \_\_\_\_\_ Check \_\_ Check# \_\_\_\_\_

\*TURN IN TO FRONT OFFICE\*