



MEMBERSHIP FORM

There are many ways to PTA. Anything you can give, whether it's time or money, will support your child's potential. We can do more together than apart. Members of CV PTA are also members of National and PA PTAs. For member benefits, see PTA.org. **Complete and return this form with member dues to your child's teacher in an envelope marked "PTA Membership".**

2023-2024 meetings are on Tuesdays at 6:30
Sept 19, Oct 17, Nov 14, Jan 16, Feb 20, Mar 19, Apr 23, May 21

CV PTA MEMBERSHIP

Member Name #1: _____ Phone: _____

Email: _____

Membership Type: Parent / Family Member Faculty

Member Name #2: _____ Phone: _____

Email: _____

Membership Type: Parent / Family Member Faculty

**Please use back of paper to list any additional new members.

CLASSROOM CREDIT

THE CLASSROOM WITH THE MOST PTA MEMBERS GETS A REWARD! TELL US WHO YOU ARE SIGNING UP FOR TODAY!

Student #1: _____ Grade: _____ Teacher: _____

Student #2: _____ Grade: _____ Teacher: _____

CLEARANCES

In order to volunteer in the schools during school hours, you **must** have clearances on file with the CVSD Central Office. Clearances are valid for 3 years after completion.

___ Yes, I have my up-to-date clearances on file.

___ No, I don't have clearances on file, or I'm unsure. Please send me information about it!

___ I do not intend to volunteer in the schools.

PAYMENT

\$10 per Adult Quantity: _____

\$10 SPONSOR A TEACHER Quantity: _____ CV Teacher Name(s): _____

I wish to make an additional donation of \$ _____

TOTAL PAYMENT SUBMITTED: \$ _____

Paid with: Cash Check # _____

Cash or Checks made payable to CV PTA

Questions? Contact **Emily Onufrak**, Central Valley PTA Membership Chair -
CVPTAMembership@gmail.com