

**WE WANT YOU**

# HVE Membership Form 2009-2010

**Membership**  
 Individual \$7  
 Family \$13  
 Life \$5.25

**Who Can Join?**  
 Parents  
 Grandparents  
 Any family members  
 Family Friends  
**Together we can make a difference!**

**Bonus**  
 Each family will be given a **FREE PTA** directory with membership

Each member is eligible to receive our e-newsletter

**Choose one:**

**Family Membership (\$13):**

List family members (please print):

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Amount \$

**Individual Membership (\$7)**

List family members (please print):

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Amount \$

**Life Membership (\$5.25) This membership is for award recipients only:**

List family members (please print):

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Amount \$

**Fill in:**

**Child's Info:**

<u>Child's Name</u>	<u>Grade</u>	<u>Teacher</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Address/Phone Info:**

Address \_\_\_\_\_ City, ZIP \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Direct Donation:**

You may choose to make a one time direct donation to the PTA.

Amount \$

Make all checks payable to: HVE PTA  
 Include: Date of Birth and Driver's License Number  
 \$30 Fee for all returned checks

**Total Amount \$**