



# BROOK PARK MEMORIAL

Support our students!

## 2019-2020 PTA Membership Form

New Member  Returning Member

<b>Member #1 Name:</b>	Parent/Guardian, BPM Staff, Relative, Other
<b>Member #2 Name:</b>	Parent/Guardian, BPM Staff, Relative, Other
<b>Address:</b>	<b>City/State/Zip:</b>
<b>Home Phone #:</b>	<b>Email Address:</b>
<b>Cell Phone #:</b>	<b>Are you interested in volunteering: yes or no</b>

### Student Information

Please list all of your children attending BPM.

Child's Name	Grade Level:	Teacher Name:



### PTA Membership:

Individual Membership \$8  
Household Membership (2 adults) \$13



### Additional Tax Deductible Donation:

Not required, but appreciated! 100% of your donation stays at BPM!

\$10     \$25     \$50     \$\_\_\_\_\_    Total Amount Enclosed: \$\_\_\_\_\_

If your company matches charitable donations, please attach any required paperwork.

Please check box if paid online through Pay Pal on website!

Please make checks payable to: **Brook Park Memorial PTA**

Checks can be sent in with your student: **Please mark BPM PTA Membership on envelope**

or

Mail to:

**BPM PTA Membership  
16900 Holland Rd.  
Brook Park, OH 44142**

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**BPM PTA use ONLY:** Date Received: \_\_\_\_\_ Cash \_\_\_\_\_ or Check # \_\_\_\_\_ or Pay Pal \_\_\_\_\_  
Received By: \_\_\_\_\_ Membership Card Issued: \_\_\_\_\_ Added to Member List: \_\_\_\_\_  
Membership Chair Initials: \_\_\_\_\_ Membership Co-Chair Initials: \_\_\_\_\_