2009-2010
DONATION / MEMBERSHIP FORM
Prunedale Elementary School Parent Teacher Group (P.T.G.)

Welcome to Prunedale Elementary School Parent Teacher Group.

Please complete the following information:

Name of Parent: (s) _____
(Last Name) (First Name)

_____
(Last Name) (First Name)

Home Address: _____
Street

_____CA _____
City Zip

Home Phone #:_____ email:_____

<u>Children Attending Prunedale School</u>
(first and last names, please)

Name:_____ Teacher:_____Grade:_____ RM#:_____

Name:_____ Teacher:_____Grade:_____ RM#:_____

Name:_____ Teacher:_____Grade:_____ RM#:_____

Name:_____ Teacher:_____Grade:_____ RM#:_____

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*

Annual Donation/Membership Fee: $ **<u>5.00</u>**

Sorry, I do not have time, but I would be happy to make a donation of: $_____

Total enclosed: $_____

e-Scrip registered? Please circle one..... **YES or NO**

(If not, please contact P.T.G for a registration form at: **prunedaleptg@hotmail.com or 663-3963 x127**

Thank you for your support and see you at the next P.T.G. meeting!

P.T.G. Accounting Only: Date Paid: _____ *Amt. Paid:* _____ *Received by:*_____