Kentlake Community PTSA
Membership Form
2008-09

Cost: $14.00 per Adult Member $25.00 per Pair of Adult Household Members
$ 8.25 per Student/Staff Member

Please make checks payable to: **Kentlake Community PTSA**

Please fill out this form and send with payment to:
1. School Office marked: "PTSA Membership"
2. Mail to: Kentlake Community PTSA
PO Box 7247, Covington, WA 98042-0042
or, 3. Bring to any PTSA Meeting

Membership card(s) will be issued / mailed upon receipt of this form and fee.

PLEASE PRINT CLEARLY:

Adult Name: 1. _____

2. _____

Student Name: 1. _____ Grade: ____ Joining PTSA? Yes No
2. _____ Grade: ____ Joining PTSA? Yes No
3. _____ Grade: ____ Joining PTSA? Yes No

TOTAL ENCLOSED: _____

Your Address: _____

City/State/Zip: _____

Phone: Day: _____ Evening: _____

Email: _____ Preferred contact: Email Phone Mail

Would you like to find out more about volunteer opportunities at Kentlake? Yes No

THANK YOU FOR YOUR SUPPORT!!!

Questions / Information changes, please contact Marci Elmer at:
***Membership@kentlakehsptsa.org* or 253-740-2614**

Do not fill out this portion:

Date Received: _____ Card Issue / Mail: _____
Check # / Cash: _____ Deposit: _____
Amount: _____ Website: _____
Check Date: _____ Id # : _____