

# Monarch High PTSA MEMBERSHIP

**Please support Monarch PTSA by purchasing a PTSA Membership**

**PARENT NAME:** \_\_\_\_\_

**STUDENT NAME:** \_\_\_\_\_

**1<sup>ST</sup> PERIOD TEACHER:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**YES! I would like to join MHS PTSA**

\_\_\_\_\_ **\$ 10.00 Family Membership**

\_\_\_\_\_ **\$ 5.00 Individual or Faculty Membership**

\_\_\_\_\_ **\$ 5.00 Student Membership**

**Please make checks payable to: Monarch High School PTSA**

**100% OF PTSA FUNDS ARE USED TO BENEFIT MONARCH HIGH SCHOOL**

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