

Sprayberry High School PTSA Membership Form

Membership Fee \$5.00

Please print names of all PTSA membership applicants

PTSA Membership Dues			
Member Name/Grade	Email Address	Type of Membership ○ Parent ○ Student ○ Staff ○ Community	Membership # (PTSA to provide)
Member Name/Grade	Email Address: ○ Same as Above	Type of Membership ○ Parent ○ Student ○ Staff ○ Community	Membership # (PTSA to provide)
Member Name/Grade	Email Address: ○ Same as Above	Type of Membership ○ Parent ○ Student ○ Staff ○ Community	Membership # (PTSA to provide)
Member Name/Grade	Email Address: ○ Same as Above	Type of Membership ○ Parent ○ Student ○ Staff ○ Community	Membership # (PTSA to provide)
# of Memberships _____ x \$5.00 = Total Due for Memberships			\$ _____

Note: To apply for the PTSA Senior Scholarships, students must be members of PTSA.

Additional PTSA Donation - \$\$ stays at SHS

<p style="text-align: center;">PTSA Tax-Deductible Donation</p> <p><i>Your contribution helps the Sprayberry HS PTSA to fund programs and events such as: senior scholarships, teacher mini grants, diversity programs, facility improvements, educational programs, etc.</i></p> <p style="text-align: center;"><i>Suggested donation \$25, though any amount is appreciated.</i></p>	\$ _____
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Sprayberry e-Buzz Information – Weekly e-newsletter

In an effort to improve communication, Sprayberry PTSA would like to send more reminders and information via email. Check the box below if you would like to receive these emails. This information will not be given or sold to third parties & you can unsubscribe at any time.

Check here to receive e-Buzz messages at the above address(es).

Additional Email Address _____ Additional Email Address _____

PTSA Committee Only

Cash \$ _____ and/or Check # _____ Membership total \$ _____ Donation total \$ _____

Received by: _____ Magnets received _____ Grand Total \$ _____

Please make checks payable to SHS PTSA
Sprayberry High School PTSA, 2525 Sandy Plains Road, Marietta, GA 30066

Thank You for Supporting your PTSA!



Send Membership Packet to: _____

Student Name