

# LCMR PTA MEMBERSHIP FORM



NAME \_\_\_\_\_

PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

STUDENT(S) NAMES(S) \_\_\_\_\_

\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PER PERSON	\$ 5.00 X _____	= \$ _____
AFTER PROM	\$10.00 X _____	= \$ _____
<b>TOTAL</b>		<b>\$ _____</b>

PLEASE MAKE YOUR CHECK PAYABLE TO "LCMR PTA"

PLEASE RETURN THE FORM AND YOUR DONATION TO EITHER SCHOOL TO BE PUT IN OUR MAILBOX. YOUR DONATION WILL BENEFIT BOTH THE HIGH SCHOOL AND THE JUNIOR HIGH SCHOOL.

\_\_\_\_\_ YES!!!! I WILL HELP WITH THE AFTER PROM

**THANK YOU FOR YOUR SUPPORT!!!!!!**