

# GATEWAY ENVIRONMENTAL K-8

## LEARNING CENTER

### PTA Membership Application

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**Member Name:**

- Parent/Guardian  
 Student             Faculty Staff  
 Grandparent       Corporate Sponsor

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**Additional Member Name:**

- Parent/Guardian  
 Student             Faculty Staff  
 Grandparent       Corporate Sponsor

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**Address:**  
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**Phone:**  
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**E-Mail:**  
\_\_\_\_\_

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**Child's Name:**  
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**Homeroom Teacher/Grade:**  
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**Child's Name:**  
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**Homeroom Teacher/Grade:**  
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**Child's Name:**  
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**Homeroom Teacher/Grade:**  
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**Membership Dues:**

**\$7.00 – 1<sup>st</sup> Person**

**\$4.00 – each additional family member**

**\$20.00 – Corporate Sponsor**

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**Method of Payment**

- Cash - Thank you for your support of our PTA**

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**TOTAL ENCLOSED:\$** \_\_\_\_\_

Please complete the information above, enclose payment and application, place in a **SEALED ENVELOPE** and return to your child's homeroom teacher or give to any PTA Board Member.

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