



LVA PTO Membership Sign-Up

(Please print clearly)

Name: _____

Address: _____

Phone # _____

Email Address: _____

My child(ren) are in (check as many as apply):

Primary ___ Elementary ___ Middle ___ High ___ School

\$5 membership dues paid with cash _____ or check _____ (ck # _____)
(Please indicate cash or check)

PTO Membership #: _____