

Make checks payable to:
Mokena PTA

\$9 individual
\$12 family



everychild.one voice.[®]

**Membership
Registration
2009-2010**

Your support/membership strengthens the PTA's mission to be a powerful voice for children, a relevant resource for parents, and a strong advocate for public education.

Your Mokena PTA membership includes:

- ✓ PTA Calendar with important school event dates
- ✓ Membership in the National PTA and Illinois PTA
 - ✓ Voting rights at all meetings

Please use blue or black ink

First Member Name: _____

Second Member Name: _____

(For Family Membership)

Address: _____

Telephone Number(s): _____

E-mail: _____

(Please note: If your child is a Jr. High Student, please give us your e-mail, so we can send newsletters and information to you)

My children attend: MES MIS MJHS **Homeroom of youngest child** _____

Volunteers are essential to the existence and success of our organization. Your participation is greatly appreciated. If you have any questions regarding volunteering or membership, **please contact Donna McKenna at 708-479-0709.** Thank you.

Please check any and all categories you may have any interest or any experience.

- | | |
|---|---|
| <input type="checkbox"/> Back to School Night/Membership Registration/Book Sox Sales | <input type="checkbox"/> Family Fun Fair (February) |
| <input type="checkbox"/> Fundraiser (Fall/Spring) | <input type="checkbox"/> SCRIP (Gift Card Orders) |
| <input type="checkbox"/> Dances/Open Gym (Junior High) | <input type="checkbox"/> Staff Appreciation Essay Contest |
| <input type="checkbox"/> Family Program Night | <input type="checkbox"/> Staff Appreciation Week |
| <input type="checkbox"/> Reflections Art Program (October) | <input type="checkbox"/> Staff Appreciation Luncheon |
| <input type="checkbox"/> Santa's Secret Workshop (December) | <input type="checkbox"/> Willing to help in any area, when available |
| <input type="checkbox"/> Blood Drive/Health Fair (January) | |

- I am interested in participating in a committee**
- I am interested in chairing/co-chairing a committee**
- I have some ideas to share**

| | | |
|-------------------------------------|----------------------------|-------------------------------------|
| <input type="checkbox"/> Individual | <i>PTA Office Use Only</i> | <input type="checkbox"/> Family |
| Date Received: _____ | Cash or Check# _____ | Calendar(s): 1 2 ID Card(s): 1 2 |