



FULLERTON SCHOOL PTA

400 S. Michigan Avenue, Addison, IL 60101
630-628-2520 or 630-458-2950
www.fullertonpta.org

PTA Membership Sign Up

Yes, I would love to be a PTA Member.**

Membership dues are only \$5 per person per year!

Name(s) _____

e-mail* _____

Cell phone* _____

Can you receive text messages?* Yes No

Cell service provider (needed to receive text messages)*
 Alltel T-mobile
 AT&T US Cellular
 Sprint Verizon
 Other _____

Other phone _____

* We will communicate emergency date changes to all PTA members through e-mails and text messages to your cell phone.



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Child's/Children's name(s)	Room #(s)
Membership Dues (\$5 per person):	\$ _____
Additional tax -deductible donation (optional):	\$ _____
Total amount enclosed:	\$ _____

Please make checks payable to Fullerton School PTA. Simply return this form with your payment to school in an envelope addressed to **Lori Bolsinger, PTA Treasurer.**

**Membership required to vote at PTA meetings.

Received by: _____
Membership Committee Member Date

ACCOUNTING USE ONLY:	Date	Cash/Check #	Amount
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