

ROCKY HILL MIDDLE SCHOOL
PTA Membership 2009-2010
Please make check payable to: RHMS PTA

Student Name _____ Grade _____ Period 1 Teacher _____

Student Name _____ Grade _____ Period 1 Teacher _____

Student Name _____ Grade _____ Period 1 Teacher _____

Member Name (First) _____ (Last) _____

Home Phone (____) _____

Cell Phone (____) _____

Occupation _____

Member Name (First) _____ (Last) _____

Home Phone (____) _____

Cell Phone (____) _____

Occupation _____

_____ Two-Person Membership (\$20.00) or _____ Individual Membership (\$12.00)

To receive RHMS and PTA information via e-mail, please specify your e-mail address below:

OR

*If you are **currently** on the RHMS PTA e-mail list, please check here _____ *

Please list any skills, talents, and resources that you would be willing to offer to the RHMS PTA this year. All contributions of time and talent are greatly appreciated!

By joining the RHMS PTA you receive membership in the RHMS PTA, the Maryland PTA, and the National PTA. You will also receive a single copy of the RHMS Directory with your two-person or individual membership. If you wish to purchase **additional** copies of the RHMS Directory for \$5.00 each, please include the additional funds with your membership dues.

Number of Additional Directories: _____ @ \$5.00 a copy = \$ _____

If you would like to make a tax deductible donation to the RHMS PTA, please indicate the amount you would like to donate and include with your membership dues. Donation amount: \$ _____

Thank you for joining **YOUR** Rocky Hill Middle School PTA!