

Thomas Edison High School of Technology Support Edison Students - Join the PTSA!

FY 20, School Year 2019-2020

Name:		
Address:		
City:	State: Zip:	
E-mail:		
Phone #: ()		
Member 2		
Name:		
E-mail:		
Adult/Staff/Alumni membership (\$10) Two member		
Community Partner Membership (\$20) [one named per		
Student membership (\$5) Donation* (please clic	ck on website under 'Donations')	
Donation Amount* Name* (business or perso		
Address to mail receipt*:		
*Donated funds are contributed to SkillsUSA.		
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Membership payment can be	pe made online at:	
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Student's Name Gra	rade TE Program/Home School	
For office use only		
Student ID/Program:		
Cash: \$ Check: # Total payment: \$		