

2017/2018 MEMBERSHIP FORM

c/o John Glenn High School, 478 Elwood Road, Elwood, NY 11743

Welcome to the 2017/2018 school year. Elwood SEPTA is committed to working with administrators, families, and teachers to create a community that values and respects each student's learning abilities to ensure that all our children receive an education that allows them to reach their full potential. You can help us reach our goal by becoming a member. Please fill out the form below and return to us with your membership dues. Your dues go toward funding our local programs, as well as the advocacy work that our State and National PTA carries out on behalf of all children.

- Please check the SEPTA website on a regular basis for local resources and contact information.
- Like us on Facebook for school updates and read informative articles from various organizations.
- Our schedule of meetings for the upcoming school year will be on our website as well as on the District school calendar.
- **School Programs for 2017-2018: Sensory Friendly Movie Theater, Boyd After School Sports Clinic, Boyd After School Friendship Games, Social Events (TBA), Harley Friendship Group, Harley Krafty Kids, and Life Skill Field Trips.**

Membership Fees

- **E-cards are here!** Membership cards will be emailed from NYSPTA. **Email address is required.**
- Dues are **\$8.00 per person**
- There are **no family memberships**, Individual memberships only.
- High School students are welcomed to join.
- Student dues are **\$5.00.**
- Membership forms always available online.
- Cell phone for occasional texts.



***** SEPTA 2017/2018 Membership Form—\$8.00 per person/ \$5 per student*****

Thank you in advance for your support. Return completed form in an envelope labeled "SEPTA Membership" and send it in your child's backpack today! Or mail to ELWOOD SEPTA c/o John Glenn HS, 478 Elwood Rd, Elwood, NY 11731-4890.

Make your check payable to "Elwood SEPTA".

Membership # 1 Information		Volunteer: Yes / No		Membership Type: <input type="checkbox"/> Standard <input type="checkbox"/> Additional Adult <input type="checkbox"/> Student	
Name:	Demographic: <input type="checkbox"/> Teacher <input type="checkbox"/> Male <input type="checkbox"/> Community Member	Cell Phone:			
Email:	Building: <input type="checkbox"/> Harley <input type="checkbox"/> Boyd <input type="checkbox"/> EMS <input type="checkbox"/> JGHS	Home Phone:			
Membership # 2 Information		Volunteer: Yes / No		Membership Type: <input type="checkbox"/> Standard <input type="checkbox"/> Additional Adult <input type="checkbox"/> Student	
Name:	Demographic: <input type="checkbox"/> Teacher <input type="checkbox"/> Male <input type="checkbox"/> Community Member	Cell Phone:			
Email:	Building: <input type="checkbox"/> Harley <input type="checkbox"/> Boyd <input type="checkbox"/> EMS <input type="checkbox"/> JGHS	Home Phone:			
Membership #3 Information		Volunteer: Yes / No		Membership Type: <input type="checkbox"/> Standard <input type="checkbox"/> Additional Adult <input type="checkbox"/> Student	
Name:	Demographic: <input type="checkbox"/> Teacher <input type="checkbox"/> Male <input type="checkbox"/> Community Member	Cell Phone:			
Email:	Building: <input type="checkbox"/> Harley <input type="checkbox"/> Boyd <input type="checkbox"/> EMS <input type="checkbox"/> JGHS	Home Phone:			
Mailing Address					
Street					
City		State		Zip Code	
Student Information					
Student Name		Grade		Teacher/Homeroom	
Student Name		Grade		Teacher/Homeroom	
Student Name		Grade		Teacher/Homeroom	
For SEPTA Use Only					
_____ X \$ _____ = _____ Donation: _____ Payment Method: <input type="radio"/> Cash <input type="radio"/> Check # _____ Total Given: _____ Date: _____					
# of Members		Total Due			
Entered in NYS PTA Online Membership System Date: _____ Member No.(s) _____					

_____ (please initial and circle preference) I do / do not wish to have my email address shared with Elwood PTA Council in order to receive district wide PTA information, announcements, etc.