**SOEHL MIDDLE SCHOOL 2020/21 PTA MEMBERSHIP FORM**



***PTA Mission: To make every child’s potential a reality by engaging and empowering families and communities to advocate for all children.***

Sign up online <https://jesoehlmspta.memberhub.store> or submit form below:

Circle one: Parent/Guardian/Faculty/ Other

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student(s)**:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_\_Homeroom: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_\_Homeroom: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_\_Homeroom: \_\_\_\_\_\_\_\_\_\_\_\_\_

PAYMENT INFORMATION:

Annual Membership Dues: $10.00 (includes National & State dues)

Please make checks payable to: SOEHL MIDDLE SCHOOL PTA

Mailing address: 300 E HENRY ST, LINDEN, NJ 07036

FOR MORE INFORMATION, PLEASE CONTACT:

TANYA GRISSETT, PTA PRESIDENT: [Tanya.Grissett66@gmail.com](mailto:Tanya.Grissett66@gmail.com)

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PTA office use: Payment method: CASH OR CHECK #\_\_\_\_\_\_\_\_\_\_Date received: \_\_\_\_/\_\_\_\_/20\_\_\_\_