

Deal PTO

Roseld Avenue Deal, New Jersey 07723 (732) 531-0480

2011-2012 PTO MEMBERSHIP APPLICATION

Name(s) _____

E-mail _____

Child's Name (s)
_____ **Grade** _____

_____ **Grade** _____

Phone (home) _____

Phone (cell) _____

Preferred Way to Contact you

___ **Home phone** ___ **Cell Phone** ___ **Email**

Type of Membership:

Individual _____ **\$10.00**

Family _____ **\$15.00 (includes spouse or partner)**

Please Make Checks Payable to Deal PTO

Thank you for your support!

