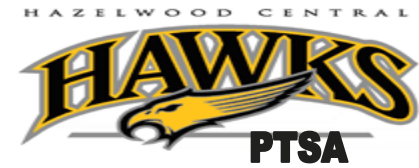


HAZELWOOD CENTRAL HIGH SCHOOL PTSA MEMBERSHIP FORM 2020-2021

Help support your child's education by joining PTSA!

Individual Membership \$7.00 per person. **Business Membership \$10.00.**

Please make check payable to HCHS PTSA.



Date / /

PLEASE PRINT

<p>1st Member (First & Last Name) _____</p> <p>Email _____</p> <p>Phone () _____ <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell</p> <p><input type="checkbox"/> Business <input type="checkbox"/> Parent / Guardian <input type="checkbox"/> Student <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Community Member</p>
<p>2nd Member (First & Last Name) _____</p> <p>Email _____</p> <p>Phone () _____ <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell</p> <p><input type="checkbox"/> Business <input type="checkbox"/> Parent / Guardian <input type="checkbox"/> Student <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Community Member</p>
<p>3rd Member (First & Last Name) _____</p> <p>Email _____</p> <p>Phone () _____ <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell</p> <p><input type="checkbox"/> Business <input type="checkbox"/> Parent / Guardian <input type="checkbox"/> Student <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Community Member</p>
<p>4th Member (First & Last Name) _____</p> <p>Email _____</p> <p>Phone () _____ <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell</p> <p><input type="checkbox"/> Business <input type="checkbox"/> Parent / Guardian <input type="checkbox"/> Student <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Community Member</p>

If Student is not listed above as a new member of the PTSA, please list name and grade below:

Student Name _____ Grade _____

Student Name _____ Grade _____

_____ memberships @ \$_____ each = \$_____ check # _____ cash CashApp: \$HCHSPTSA

_____ memberships @ \$_____ each = \$_____ check # _____ cash CashApp: \$HCHSPTSA

If you would like to help Hazelwood Central High School PTSA, on a specific committee please indicate below.

2020-2021 PTSA Volunteer and Committee opportunities:

- Project Graduation Homecoming Fundraising Founders Day Hospitality Run/Walk Concession Senior Slam Freshman Frenzy

For PTSA Use:		
Date rec'd: _____	Cards issued: _____	Payment amount \$ _____

THANK YOU!! Please return form to: HCHS PTSA, 15875 New Halls Ferry Road, Florissant, Missouri 63031, 314-953-5400

For PTSA Use:

Date rec'd: _____

Cards issued: _____

Payment amount \$ _____