



## 2011-2012 Nixon Elementary PTA Membership Form

200 Nixon Drive, Hiawatha IA 52233 ■ nixonptaevents@gmail.com

Member Information	Member 1	Member 2
Name of person joining PTA:		
Relationship to student (Please check one):	<input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Teacher <input type="checkbox"/> Friend / Neighbor <input type="checkbox"/> Staff <input type="checkbox"/> Other: _____	<input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Teacher <input type="checkbox"/> Friend / Neighbor <input type="checkbox"/> Staff <input type="checkbox"/> Other: _____
Street Address:		
City, State, Zip:		
Preferred phone number:		
Preferred email address:		



Student name(s)	Teacher(s)	Grade
1.		
2.		
3.		

*Thank you for supporting Nixon PTA – your membership  
will help us reach our goal of one membership for every student at Nixon!*

Item	Amount
<b>\$6 Basic</b> – single membership that gives one person access to all of the benefits of local state and national membership: _____ x \$6.00	
<b>\$20 Bobcat Sponsor</b> – <i>Optional</i> – includes two basic memberships and an additional donation that stays with the local PTA unit:	
<b>Nixon Sponsor</b> – <i>Optional</i> – additional donation of any amount that stays with the local PTA unit:	
<b>Total</b> – Please make checks payable to Nixon Elementary PTA	

**For PTA Use:** Membership No(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_ Membership card(s) issued:  Yes  No  
Date: \_\_\_\_\_ Paid by:  Cash  Check # \_\_\_\_\_ Completed by (initials): \_\_\_\_\_