

OMNI PTSA MEMBERSHIP DRIVE

\$500 GOLDEN PAW MEMBERSHIP _____

\$250 JAGUAR CLUB MEMBERSHIP _____ \$100 Gold Membership _____

\$50 Silver Membership _____ \$25 Family Membership _____

\$20 Grandparent Membership* _____ **Other \$**_____

Donations are tax deductible. Make your check out to **OMNI PTSA**. Please print legibly, fill out *completely*, and return to OMNI.

*Grandparent memberships are not included in any other membership level.

How many of each (you can enter more than one type—for example, a teacher can also be a parent):

Parent #___ Student #___ Family #___ Teacher #___ Corporation #___ Grandparent #___ Other #___

Name or Corporation: _____

Address: _____ Phone: _____

Email: _____

Child's Full Name: _____ Grade: ___ 6th Period Teacher: _____

Child's Full Name: _____ Grade: ___ 6th Period Teacher: _____

Child's Full Name: _____ Grade: ___ 6th Period Teacher: _____

Please place completed form and dues in an envelope, addressed to **OMNI PTSA**. Please call OMNI with any questions or send an email to omniptsa@yahoo.com.



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