



# DESERT HEIGHTS CHARTER SCHOOL PTSA MEMBERSHIP FORM



## CIRCLE ONE

NAME: \_\_\_\_\_  
 FAMILY MEMBER: \_\_\_\_\_  
 FAMILY MEMBER: \_\_\_\_\_  
 FAMILY MEMBER: \_\_\_\_\_  
 FAMILY MEMBER: \_\_\_\_\_

Parent	Teacher	Student	Staff	Other
Parent	Teacher	Student	Staff	Other
Parent	Teacher	Student	Staff	Other
Parent	Teacher	Student	Staff	Other
Parent	Teacher	Student	Staff	Other

STREET ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP: \_\_\_\_\_

TOTAL NUMBER OF PEOPLE:   
 X \$5.00

HOME PHONE: \_\_\_\_\_

TOTAL AMOUNT DUE:

WORK PHONE: \_\_\_\_\_

TYPE OF PAYMENT:

CELL PHONE: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PTSA Initials:

EMAIL ADDRESS(es): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date:

Given to Membership Chair:



