

**PTA Membership Application**

Checks should be made payable to **Noxon Road PTA.**  
**Please join now!**

\$10.00 per couple: \_\_\_\_\_  
\$5.00 per individual: \_\_\_\_\_ Amount Enclosed: \$ \_\_\_\_\_

Name(s): \_\_\_\_\_  
                    First                      Last

\_\_\_\_\_   
                    First                      Last

Phone: \_\_\_\_\_

Children's Name(s): \_\_\_\_\_ Grade      Teacher

\_\_\_\_\_

\_\_\_\_\_ Grade      Teacher

E-mail Address (for Noxon PTA messages only):

\_\_\_\_\_

\_\_\_\_\_

Please return to your child's teacher in an envelope marked:  
"PTA Membership."