



PTSA MEMBERSHIP FORM

I would like to purchase a membership with the Bowditch Middle School Parent Teacher Student Association (PTSA) since I believe in the philosophy of the PTSA and support the activities and programs coordinated by the Bowditch Middle School PTSA.

I would like to purchase the following memberships:
Please indicate parent, teacher or student.

P T S Member Name: _____

Email: _____

P T S Member Name: _____

Email: _____

The cost of each membership is **\$10.00**. Please pay with cash or check; checks payable to "**BOWDITCH PTSA**". Please attach the payment with this form and place in the PTSA Mailbox in the Office Mailroom.

For a listing of Benefits of PTSA Membership visit the PTSA website at bowditchptsa.org/membership.

THANK YOU FOR YOUR SUPPORT!!



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