Hayfield Secondary

PTSA

*every*child. *one* voice.®

PTSA Membership Form 2008-09

Adult Member Name _____

Adult Member Name _____

Address _____

Email(s) _____

Phone number _____

Student Member Name _____ **Grade** _____

Student Member Name _____ **Grade** _____

Student Member Name _____ **Grade** _____

High School Subschool _____

Middle School Subschool _____

Adult Dues - $15.00 **Student/Teacher Dues - $5.00**

Membership(s) Enclosed:

$15.00 Adult	**x** ____ (# of members)	**=**	**$** _____
$ 5.00 Student/Teacher	**x** ____ (# of members)	**=**	**$** _____
Donation to PTSA (total donation is tax deductible)			**$** _____
TOTAL AMOUNT ENCLOSED			**$** _____

Adult members receive a copy of the Hayfield Student Directory.
Make checks payable to Hayfield PTSA.
Return membership form with your payment to the membership table at
Back to School Nights or mail to:
Michele Menapace, Hayfield Membership, 3600 Austin Avenue, Alexandria, VA 22310