

Irvine High School **PTSA** Membership 2010-2011

Parent(s) Name: _____ Phone: _____

Address: _____ Email: _____

Student: _____ Grade: _____

Student: _____ Grade: _____

Yes, I would like to join Irvine High School PTSA!
Please check the level of membership.

_____ Individual Membership (one member) **\$25.00**

Member Name _____ **Or**

_____ Family Membership (two members) **\$40.00**

1st Member Name _____

2nd Member Name _____

_____ Additional Family Member **\$15.00**

Addt'l Member Name _____

Yes, I would like to make a donation to the PTSA
Emergency preparedness fund **\$8.00**

Yes, I would like to make a donation to the PTSA
Mini- Grant fund \$ _____

Yes, I would like to make a donation to the PTSA
Health Clerk fund \$ _____

Yes, I would like to make a donation to the PTSA
I.H.S Library fund \$ _____

Yes, I would like to make a donation to the PTSA
2011 Grad Nite fund \$ _____

Yes, I would like to make an additional donation to the PTSA \$ _____

No, I do not wish to join PTSA at this time but,
I would like to make a donation \$ _____

Total Tax Deductible donation \$ _____

IHS PTSA thanks you for your Support