S E P T A (Special Education PTA) MEMBERSHIP FORM

Office use Member#				
AZZIMOCI II				
Adult member			_M_	_F
Adult member			_M_	_F
Teacher			_M_	_F
Student	Grade	M_	_F_	_
Student		M_	_F_	_
Student				
Address				
Home#Work				
Cell phone#E-Ma				
Cash Check_ Money Order Date: Adults: \$10.00 Total: Received by:				
Hobbies:				
Are you interested in joining any of the committees Check one: Membership Fundraising Au				
SEPTA MEMBE	ERSHIP RECEIP	T:		
Amount Paid:	Date:			
Cash Check#				
Received by:	· ·			

You don't have to have a child in the school district to become a SEPTA member!