



2018 – 2019 Franklin Academy Boynton Beach Campus PTO Membership Application

SELECT ONE: Parent/Guardian/Grandparent Teacher/Staff

Full Name: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Room Teacher: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Room Teacher: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Room Teacher: \_\_\_\_\_

Best form of contact: (Circle one) E-Mail Text Phone Call

- Yes! Add me to Franklin Academy Boynton Beach Campus PTO E-mail list.
Yes! Send me a Facebook invite so I can stay connected.
Yes! Contact me about volunteer opportunities.
Yes! E-mail me a receipt for the below payment for tax purposes.



Membership:

- I want to join the Franklin Academy PTO for \$10.
I want to join the Franklin Academy Boynton Beach Campus PTO and get the PTO bundle (PTO shirt/car magnet) for \$20.

Adult Shirt Size: (Circle one) X-Small Small Medium Large X-Large XX-Large

- I wish to sponsor the teacher/staff member \_\_\_\_\_ for a teacher membership of \$5.
I want to add another member for \$5.

Additional Member Information: (Circle One) Parent/Guardian Grandparent

Full Name: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

Total PTO Membership: \$ \_\_\_\_\_

Payment Method Enclosed:

- Check # \_\_\_\_\_ made payable to Franklin Academy PTO.
Money Order # \_\_\_\_\_ made payable to Franklin Academy PTO.

PTO Use Only:

Received On: \_\_\_\_\_

Received by: \_\_\_\_\_