

**Chapel Hill Elementary PTA**  
**PTA Membership Registration 2009-2010**

Name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

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

Amount Enclosed: \_\_\_\_\_

Student Name: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Student Name: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Student Name: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Please list one e-mail address where you would like PTA reminders and updates sent.**

Please enclose \$7.00 per membership  
*Please make checks payable to **Chapel Hill Elementary PTA***  
*Please write "PTA Membership" on the envelope.*