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2017/2018 Bell PTA Membership Form

Please fill out the following form and return to school with your payment.

First Name _____

Last Name _____

Your Primary Email _____

Secondary Email _____

Cell Number _____ Text OK? Y or N

Street Address _____

City _____

Zip Code _____

Students Name(s)/Grade(s) _____

Payment Information:

Please select ___\$10 Parent ___\$7 Teacher ___\$7 Staff

Tax Deductible Donation Amount: \$ _____

Total Amount Enclosed \$ _____

Please make checks payable to: Bell PTA

Return form and payment to school or mail to:

Bell Middle School PTA

1001 Ulysses St.

Golden, CO 80401

Thank you for your support!