

Persons who wish to join are: *Personas que desean ser miembros:*



1. _____
 Name (last, first) *Nombre (apellido, primero)*
 Parent *Padre* Student *Estudiante* Teacher *Maestro* Staff *Personal* Community *Comunidad*

2. _____
 Name (last, first) *Nombre (apellido, primero)*
 Parent *Padre* Student *Estudiante* Teacher *Maestro* Staff *Personal* Community *Comunidad*

E-mail Address *Dirección de carrero electrónico*

E-mail Address *Dirección de carrero electrónico*

Address *Dirección*

Address *Dirección*

The PTA / PTSA of **JUSTICE STREET SCHOOL**

thanks you for your membership.
agradice su membresia.

Dues for each person are
La cuota por persona es de **\$6.00**

Total amount enclosed
Cantidad incluida _____

NOTE: Less than \$2.00 of the \$6.00 membership dues stays in our unit. The remainder is sent to our Council, District, State and National PTAs. Should you choose to make an additional tax deductible donation (*100% of which remains in our unit*), please do so through our **Pledge Drive**. We appreciate your support.

Your students in this school: *Sus estudiantes en esta escuela:*

Name <i>Nombre</i>	Teacher <i>Maestro</i>	Grade <i>Nivel</i>	Room number <i># de salon</i>

As a member, I understand that my address information will be shared with the California State PTA and the National PTA.
Como miembro, comprendo que me dirección se compartina con la PTA de California y la PTA Nacional.