



# Jackson Middle School PTO



## Membership Form

Parent/Guardian Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone

Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Cell: \_\_\_\_\_

Student: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

Student: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

Student: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

Student: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

PTO Membership Dues

\_\_\_\_ \$10 Family

\_\_\_\_ \$25 Silver Level

\_\_\_\_ \$100 Platinum Level

\_\_\_\_ \$5 Faculty/Staff

\_\_\_\_ \$50 Gold Level

\_\_\_\_ \$ \_\_\_\_ Other

With permission, the names of Platinum, Gold, Silver Levels will be made public. Please initial if we have your permission to do so. \_\_\_\_\_

Jackson Middle School PTO is a non-profit organization. All donations are tax deductible.

THANK YOU FOR YOUR SUPPORT! Please make checks payable to the Jackson Middle School PTO. Checks and membership forms may also be mailed to Jackson Middle School, 8217 Atomic Road, Jackson, SC 29831.

Volunteer opportunities- Please check the area to which you would be willing to assist

\_\_\_\_ Fundraising Committee

\_\_\_\_ Membership Committee

\_\_\_\_ Officer (Treasurer, Secretary, etc.)

\_\_\_\_ Volunteer Committee

\_\_\_\_ Publicity Committee

\_\_\_\_ Other-Please list \_\_\_\_\_ if you work for someone or know someone that may be able to make contributions to the PTO please list with their phone number so a board member can contact them.