GADSDEN CITY HIGH SCHOOL PTSO MEMBERSHIP FORM

wiember Name:					
Address:					
Phone:	Home _			Work	
Check One: INDIVIDUAL MEMBERSI	HIP (\$5.00)	FAMILY N	MEMBERSHIP	(\$10.00)	
Additional Contribution	to GCHS PTSO (Ta	x Deductible) -	Amount \$		
Total Amount Attached	: \$	Check One:		Cash	
			Check _	Ck#	
STUDENT NAMES:		GRADE	1 ST BLO	CK TEACHER	
	EN CITY HIGH SC	HOOL PTSO ME		FORM	
GADSDE Member Name:		HOOL PTSO ME	MBERSHIP	FORM	
GADSDE Member Name: Address:	EN CITY HIGH SC	HOOL PTSO ME	MBERSHIP	FORM	
GADSDE Member Name: Address: Phone:	EN CITY HIGH SC	HOOL PTSO ME	MBERSHIP	FORM Work	
GADSDE Member Name: Address: Phone: Check One: INDIVIDUAL MEMBERSI	EN CITY HIGH SC Home HIP (\$5.00)	HOOL PTSO ME	MBERSHIP Cell MEMBERSHIP	FORM Work (\$10.00)	
GADSDE Member Name: Address: Phone: Check One: INDIVIDUAL MEMBERSI	EN CITY HIGH SC Home _ HIP (\$5.00)	FAMILY N	MBERSHIP Cell MEMBERSHIP Amount \$	FORM Work (\$10.00)	
GADSDE Member Name: Address:	EN CITY HIGH SC Home _ HIP (\$5.00)	FAMILY N	MBERSHIP Cell MEMBERSHIP Amount \$ e: Cash	FORM Work (\$10.00)	