

**We encourage you to JOIN ONLINE - Click the Pay Pal link on** [**www.victor.tusd.org**](http://www.victor.tusd.org)

 **OR COMPLETE THIS FORM AND SUBMIT IT TO YOUR TEACHER OR SCHOOL OFFICE**

**Victor PTA 2017-2018 Membership**

**Member Information:**

**Ο Parent/ Guardian Ο Teacher/Staff Ο Relative/Friend**

**Member(s) name:**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of memberships purchased ($10/member): 1 2 3 4 Total amount:**

**Student(s) name: *First and Last name(s) of each student and Room #***

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher’s name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher’s name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher’s name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Questions? E-mail us at VictorVikingsMembership@gmail.com or visit victorelementary.wix.com/victor

**PTA USE ONLY**

**Cash/Pay Pal/Check No#: \_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_ Rec’d by:\_\_\_\_\_\_ Date Rec’d\_\_\_\_\_\_**

**\* PLEASE WRITE SEPARATE CHECKS FOR DONATION AND PTA MEMBERSHIP. CHECK TO ‘ VICTOR PTA’**