

## **MEMBERS INFORMATION:**

| FIRST NAME:              | LAST:   |                                   |
|--------------------------|---|-----------------------------------|
|                          |   |                                   |
| FIRST NAME:              | LAST:   |                                   |
|                          |   |                                   |
| ADDRESS:                 |   |                                   |
| CITY, STATE, ZIP CODE:   |   |                                   |
| D110115#                 |   |                                   |
| PHONE#:                  | EMAIL:  |                                   |
| STUDENT INFORMATI        | ON:   |                                   |
| FIRST NAME:              | LAST:   | GRADE:                            |
| FIRST NAME:              | LAST:   | GRADE:                            |
| ***MFMRF                 | RSHIP DUES ARE \$25   | PFR FAMII Y***                    |
|                          | IND CREDIT CARDS. PLEASE MAKE CHECKS  |                                   |
| MAY SEND CASH OR CHECK I | PAYMENT WITH COMPLETED FORM IN ENVER<br>POOL PTA. IF YOU HAVE ANY QUESTIONS F | LOPE WITH CHILD TO SCHOOL. PLEASE |

BRITNEY BEAUCHEMIN AT <u>WAXPOOLSPRESIDENT@WAXPOOLESPTA.COM</u>.

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