

KINCAID PTA 2018-2019 MEMBERSHIP FORM



Help support all Kincaid Kids by joining the PTA!

Membership Cost: \$15.00 per person, each school year
(\$12+ of this goes to annual dues for Alaska PTA, National PTA & PTA Insurance)

1st Memb	er Name:				
		□Kincaid Staff			
Home Pho	ne:	Cell P	none:		
Address: _		Zip			
Email:					
	(Email is our prima	ary method of comm	unication among	PTA members	
2 nd Memb	er Name:				
		☐ Kincaid Staff			
Home Phor	1e:	Cell Ph	one:		
Address: _			Zip		
17					
-	(Email is our prima	ry method of commu	nication among	PTA members)	
Place list all	ahildran attandina	V:	1 1		
		Kincaid for the 2018	-		
Student Name	e:		Grade:		
Student Name	e:		Grade:		
Student Name	e:		Grade:		
Student Name):		Grade:		
Are there any	specific activities/p	rograms that you lik	o to ho impolend	. 1:1.0	
Me there any i	specific activities/p	rograms mat you nk	e to be involved	with?	
_	u like to see PTA do	llars spent this year	2 All graggestions		
110W Would you	unke to see 1 1A de	mais spent uns year	r All suggestions	are welcome!	
Paid:					
memb	ership(s) at \$15.00	each = \$	□ cash □	check #	
	P(2) at 419:00			CHECK #	