



Membership Cost: \$10 per person \$5 each additional person

Your membership fee helps PTA provide enriching and exciting activities for our students & staff.

NAME: _____	
ADDRESS: _____	
EMAIL: _____	PHONE: _____
STUDENT(S): NAME: _____	GRADE: _____
NAME: _____	GRADE: _____
NAME: _____	GRADE: _____
NAME: _____	GRADE: _____
I AM: PARENT/GUARDIAN ___ BBES STAFF ___ RELATIVE (NON PARENT/GUARDIAN) ___ COMMUNITY MEMBER (WITHOUT CHILDREN AT BBES) ___	

FOR PTA OFFICAL USE ONLY:

DATE REC'D _____ PMT FORM: CHECK# _____
CC: _____ CASH _____ REC'D BY _____

