

JT 5-6 PTN (Parent Teacher Network) 2025/2026 Staff Membership Form

Please complete this form by 11/26/25 and place it in the PTN mailbox.

First & Last Name, Position & Email

*Note: Membership information solely used for communicating PTN business and will not be shared.

Payment Amount: \$5 per staff member

_____ cash/check _____ Venmo @JT5-6PTN

Would you like to volunteer your time to help out throughout the year?
(check one) * List of events listed on our school PTN webpage and FB page

Yes_____ No_____ Maybe_____

If Yes, please list the event(s) you are interested in:

Stay Informed!!!!

- Join our Facebook Page....**JT5-6 PTN**.
- Check out the JT 5-6 Webpage and look for the **Parent Teacher Network** section.