**JMHS PTSN (Parent Teacher Student Network)**

**2020/21 Membership Form**

Please complete this form by November 1st and drop off to the PTSN mailbox in the FINE ARTS office in an envelope marked **JMHS PTSN,** or mail to JMHS PTSN, 101 Don Connor Blvd., Jackson, NJ 08527.

Membership supports student scholarships, student of the month recognition, and faculty. Please make all checks payable to “JMHS PTSN” or pay through PayPal jmhsptsn@jacksonsd.org. Thank you!!

**Parent Name(s) & Phone(s) Email(s):**

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

Payment Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_cash/check

$10 per family.

**Student Name(s), Grade(s), & HR Teacher(s):**

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**Would you like to volunteer your time to help out throughout the year?**

**(check one)** \* List of events listed on our school PTSN webpage and FB page

Yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Maybe\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I am sorry I would love to volunteer but have too many commitments, please accept my one-time PTSN donation. (check one)**

$25\_\_\_\_\_\_\_\_\_\_ $50\_\_\_\_\_\_\_\_\_\_\_ $75\_\_\_\_\_\_\_\_\_ $100\_\_\_\_\_\_\_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Stay Informed!!!!**

* Join our Facebook Page…**.JMHS PTSN.**
* Check out the Memorial Webpage and look for the **Parent Teacher Student Network** section.