

YOU ARE INVITED TO JOIN SYRE PTA!!!!

Member #1 _____

Member #2 _____

Phone number _____ Email Address _____

*Student Name _____ Grade _____

Teacher _____ Room # _____

*Student Name _____ Grade _____

Teacher _____ Room # _____

*Student Name _____ Grade _____

Teacher _____ Room # _____

Please complete one envelope per family and list all your Syre Students. Return your envelope to the Syre office or classroom teacher. Thank you!

Make Checks payable to "SYRE PTA": See sheet attached for details.

_____ \$25 Couple _____ \$14 Individual _____ \$ Donation _____ I would like to be a member, yet do not have the funds at this time.