

PIRATE CREW PTO

Membership Form



Member Name: _____

Member Name: _____

Email Address(es): _____

Telephone #: _____

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

\$5.00 per member

Amount enclosed \$ _____

Make Checks payable to: Pirate Crew PTO

Please send the form back to school or mail to:

Pirate Crew PTO

402 South Fifth Street

Harbor Beach, MI 48441
