

 **OCOTILLO RIDGE ELEMENTARY** 

TEAM UP!
JOIN PTA

NAME(S) _____

PARENT **GRANDPARENT** **TEACHER** **STAFF** **OTHER**

ADDRESS _____

EMAIL _____ **PHONE** _____

STUDENTS AT ORE

CHILD'S NAME	CHILD'S TEACHER

WANT TO VOLUNTEER?

BEST TIME TO HELP US

MORNING **AFTERNOON** **EVENING** **ANYTIME**

TYPE OF VOLUNTEER WORK MOST INTERESTED IN DOING?

CLASSROOM **FUNDRAISERS** **EVENTS** **ALL**

PTA DUES \$10 PER PERSON \$ _____

OPTIONAL CASH DONATION \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

****MAKE CHECKS PAYABLE TO OCOTILLO RIDGE PTA****

FOR PTA USE ONLY
AMOUNT:

DATE RECEIVED:

CASH OR CHECK #

___ **SUBMITTED TO AZ PTA**