KORAES PARENT TEACHER ASSOCIATION
2007-2008 MEMBERSHIP APPLICATION

$15.00 PARENT / $5.00 GRANDPARENT

MEMBER NAME: _____

ADDRESS: _____

_____

SIGNATURE:_____ DATE: _____

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(PLEASE MAKE CHECKS PAYABLE TO: KPTA)

Please return this form in your child's folder through his/her classroom.

Would you like a copy of the by-laws? _____ _____
Yes No

THANK YOU FOR SUPPORTING THE KPTA!