

Murphy Middle School PTA Membership

Parent name(s): _____

Address: _____

Phone: _____

Email: _____

Student name(s) & grade: _____

\$10 per adult member _cash _check#_____ Amount enclosed: _____

Checks made out to **MMS PTA**

*Each PTA member receives a student directory!

Parent signature is required authorizing PTA to publish student and family information in the student directory. This information will be distributed to Murphy MS PTA members only.

Sign _____ date _____