

2018-2019 McCullough PTO Membership

MEMBERSHIP PER *FAMILY \$10

(Please make check payable to McCullough PTO)

Name #1 : _____

Phone #1: _____

Name #2 : _____

Phone #2: _____

Address: _____

Child's Name

Grade

Teacher

Room #

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Parents/Guardian, Siblings 18 and older, Grandparents