

# Hamburg Central PTSA

## Membership Form



Hamburg Central PTSA – Please show your support by becoming a member today!  
**\$8.00 Per Member (including Students – if applicable)**

We are committed to making every child’s potential a reality by engaging and empowering families and communities to advocate for all children. You can help us reach our goal in this community by becoming a member. Please fill out the form below and return to us with your membership dues. Your dues go toward funding our local programs and advocacy efforts, as well as the advocacy work that our State and National PTA carries out on behalf of *all* children.

*Additional Ways to support the Hamburg Central PTSA:*

Register your **Tops Bonus Card** with the Hamburg School of your choice – **MUST RE-REGISTER EVERY YEAR!!** Entering your number on this form will register you with the school that you submitted the application to.  
 Shop at **smile.amazon.com**... On your first visit – choose Hamburg Central PTSA as your non-profit of choice. The Hamburg Central PTSA will then earn a % of every dollar that you spend with smile.amazon.com.  
 Make a **donation with your application**. See Application Total section below.

To submit this application: Send this completed form and payment to school with your child. To pay with a credit card use our online system at [www.HamburgPTSA.com](http://www.HamburgPTSA.com), or use the QR code above. Or mail this completed application with payment to Dana Lamb, 5172 Arnold Court, Hamburg, NY 14075

**Member #1 Information**

Name	Email (required to send eCard)	Tops Bonus Number
Phone number: <input type="checkbox"/> Home <input type="checkbox"/> Mobile (will include texting)	<input type="checkbox"/> Male <input type="checkbox"/> Female	Interested in Volunteering <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Community Member	

**Member #2 Information – Additional non-student members can be entered on back or on a separate page**

Name	Email (required to send eCard)	Tops Bonus Number
Phone number: <input type="checkbox"/> Home <input type="checkbox"/> Mobile (will include texting)	<input type="checkbox"/> Male <input type="checkbox"/> Female	Interested in Volunteering <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Parent <input type="checkbox"/> Teacher/Staff <input type="checkbox"/> Community Member	

**Student Information – Additional students can be entered on back or on separate page**

Student Name	Y for Student to Join (\$8.00 each)	Grade	Teacher/Homeroom	School

**Application Total**

Please consider including a **donation with your application**. Please know that any donation made above and beyond the \$8.00 per person membership fee will go directly to the Hamburg Central PTSA.

Number of Members: \_\_\_\_\_ X \$8.00 = Total Membership Dues: \_\_\_\_\_ + Additional Donation: \_\_\_\_\_ = Application Total: \_\_\_\_\_

**For PTA Use Only**

_____ X \$8.00 = _____ # of Members                      Membership Due	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____
Membership Due + Donation = Total Received	Entered in Online Membership System Date: _____ By: _____