

Wilbur Wright Middle School - PTO Membership Form

WWMS STUDENT'S INFORMATION *(please print)*

Last, First Name: _____ Grade: _____

Last, First Name: _____ Grade: _____

Last, First Name: _____ Grade: _____

PARENT'S INFORMATION

If returning WWMS PTO member from previous school year check here and agree to the selections made in the previous school year ____

(If returning, note only changes – note new texting option; you will be responsible if carrier fees apply)

Parent/Guardian's Last, First Name: _____

Home Phone: _____ Cell Phone: _____

I agree to receive text notices ____ (initial here) Carrier name _____

Email: _____

Add to PTO FaceBook Group: ____ Yes or ____ No

PTO DIRECTORY: Directories will include above information and will be emailed to each member family. If you **do not** wish to have parent's information included, *please initial here* ____

VOLUNTEER SELECTIONS: Please check off how you can help at WWMS this year! We will be using SignUp Genius again this year for event sign up.

____ Yes, please let me know about all PTO events

____ Yes, please let me know about school time events (teacher lunches, student treat days)

____ Yes, please let me know about evening events (open house help, open gym nights)

\$20.00 Membership Fee – per family -- Cash, Checks or PayPal accepted

____ Cash

____ Checks should be made to WWMS PTO

____ PayPal to wilburwrightpto@gmail.com

(selecting friends/family and please add note "PTO Membership")

Cash or check payments may be mailed to:

WWMS, Attn: PTO, 8650 Columbia Ave, Munster, IN 46321