



**DeKalb Early College Academy**

Membership # \_\_\_\_\_

Receipt # \_\_\_\_\_

Home street address		City and zip code	Home phone
Mother's name	Mother's address/ phone <u>if different</u>		Mother's email
Mother's Cell #	Would you like communications sent via text?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Father's name	Father's address/ phone <u>if different</u>		Father's email
Father's Cell#	Would you like communications sent via text?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Student #1 Full Name	Grade
Student # 2 Full Name	Grade
Student # 3 Full Name	Grade

**Parent's signature** .....

Check here if your company offers a matching donation. Company Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_

**Membership**

<b>PTA MEMBERSHIP:</b>	<b>DECA Household</b>	<b>\$ 20.00</b>
	<b>DECA Staff or Teacher</b>	<b>\$ 10.00</b>
<b>Donation -Teacher Appreciation:</b> (optional)	<b>Breakfast/Lunch</b>	<b>\$</b>
<b>Donation - For Seniors</b> (optional)	<b>Prom</b>	<b>\$</b>
<b>Additional Donation</b> (optional)	<b>School</b>	<b>\$</b>
<input type="checkbox"/> Cash \$ _____ <input type="checkbox"/> Charge	<b>TOTAL AMOUNT OF ORDER</b>	<b>\$</b>

Yes, I/we would like to assist with the following:

<input type="checkbox"/> <b>PTA</b> <input type="checkbox"/> Food/drink donations for events <input type="checkbox"/> Office Administration <input type="checkbox"/> Attendance / Front office volunteers <input type="checkbox"/> Counseling Office and Career Center <input type="checkbox"/> Special Events	<input type="checkbox"/> Staff Appreciation events <input type="checkbox"/> PAT (Parents Assisting Teachers) <input type="checkbox"/> Healthy Life Choices <input type="checkbox"/> Special Education <input type="checkbox"/> Awards Recognition <input type="checkbox"/> College Tours	<input type="checkbox"/> Campus Beautification <input type="checkbox"/> Visual Arts and School Décor <input type="checkbox"/> Media Center <input type="checkbox"/> Miscellaneous or one-time tasks <input type="checkbox"/> Field Trips <input type="checkbox"/> Unsure; please call me
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I own a business and would consider donating goods/services/resources. Business Contact Info: \_\_\_\_\_

**For PTSA Use Only**

Completed by volunteer: \_\_\_\_\_

To satisfy DECA Policy please complete this form and make payment for 2015-2016 school year.  
**You may also drop off in the PTSA Box.**

**Thank You for supporting DeKalb Early College Academy PTA!**