

BLAKE PTSA MEMBERSHIP FORM 2011-2012

Student's Name _____ Grade _____

Full Name (please print) _____

(Include name of both parents/adults for family membership)

Place of Work _____ *My employer matches charitable contributions* _____

E-mail address#1: _____ E-mail address #2: _____

Phone# 1 _____ (H/W/C) Phone #2 _____ (H/W/C)

Street Address _____

City, State, Zip _____

___ Check here if you do not wish to receive school-related PTSA updates and announcements via e-mail.

___ Check here if you wish to receive the PTSA newsletter, the Blake Blue Note, **electronically only**;
NOT a hard copy via USPS.

___ Check here if you wish to receive the Blake Blue Note in **HARD COPY**; mailed home.

BLAKE DIRECT APPEAL CAMPAIGN CONTRIBUTION

- **Direct Appeal is the main source of funds for the Blake HS PTSA operating budget.**
- *Consider making a \$75 contribution in addition to membership, but any amount will be appreciated.*
- **100% of your donation is fully tax deductible** and directly benefits Blake students.
- You can donate as an individual, family or as a business.
- Use your employer matching if available!

___ I prefer that my family **NOT** be included in the list of contributors in the Blake Blue Note newsletter.

___ I **would** consider a second contribution after January 1. Please contact me again.

Yes, I want to join and have selected the following membership(s):

PTSA Single Membership (1 adult = \$21.00) _____ \$ _____
(Name)

PTSA Family Membership (2 adults = \$27.00) _____ \$ _____
(Both Names)

Student Membership (\$6.00) _____ \$ _____
(Name)

Blake Staff Membership (\$6.00) _____ \$ _____
(Name)

Alumni Membership (\$11.00) _____ \$ _____
(Name)

Direct Appeal Contribution

Bengal Supporter - **Up to \$99**

Friends of Eubie - **\$100 - \$249**

Eubie Gold Level - **\$250 - \$499**

Red Carpet Level - **\$500 or more**

Direct Appeal Campaign Contribution \$ _____

MEMBERSHIP + DIRECT APPEAL CAMPAIGN CONTRIBUTION TOTAL = \$ _____

PAYMENT METHOD (check one): ___ Cash ___ Check (Blake HS PTSA)

Signature _____ **Date** _____

Mail to: PTSA Membership c/o Blake HS, 300 Norwood Road, Silver Spring, MD 20905

THANK YOU FOR YOUR SUPPORT!