

Genevieve Didion PTA  
**MEMBERSHIP**  
2012-2013

Please return this form to your child's teacher by  
Friday, September 21<sup>st</sup>.

Dues are only \$10.00 per parent/guardian.

Parent/Guardian Name(s): \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Child(ren) Attending Didion:

Name	Teacher
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Name	Teacher
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Name	Teacher
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Name	Teacher
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Please accept my *additional* gift donation of \$\_\_\_\_\_.

*All **additional** gift donations will receive a receipt including our  
Non-Profit Tax ID#*

Total Enclosed: \$\_\_\_\_\_

**Please make checks payable to "GENEVIEVE DIDION PTA"**

Or ask about our new electronic payment options

Please contact Dan O'Donnell at [odonnell333@att.net](mailto:odonnell333@att.net) with questions

Thank you for your support!