

# Central Valley PTA

Central Valley School District  
Monaca, Pennsylvania 15061

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***Every Child. One Voice.®***  
***Join the PTA!***

Dear Parents, Teachers, Students, Guardians, and Community Members:

The Central Valley PTA invites you to join us in making a difference in the education and quality of life for our children. It has been proven that children are more successful when parents, family members, school staff, students, and the community all work together in ensuring the success of our schools. The PTA is designed to bring all these groups together to share thoughts and ideas about programs and activities.

*Membership in the PTA does **not** mean that you have to volunteer your time.* By just joining, you are financially helping to make a difference. The PTA Membership Committee's goal this year is to have 100% participation. We need each of you to help us achieve this goal!

This year's annual dues are only \$8.00 per person. Of that \$8.00, more than 50% will be directly used by the Central Valley Schools to provide assistance with such items as:

- ✓ Monthly Children's Programs and Assemblies
- ✓ Accelerated Reading Program
- ✓ Field Trips and Busing for Field Trips
- ✓ Classroom Parties and Event Day

**Please complete the form below and return it to the school in an envelope marked "PTA Membership" along with your annual dues of \$8.00 per person. If paying by check, please make it payable to the Central Valley PTA.** Please make sure to include your children's grade and teacher.

The homeroom class that has the largest membership drive return at Center Grange and Todd Lane will be provided a special classroom event or activity.

Please contribute to the success of the 2009-10 membership drive.

Thank You,  
Rachel Kerr ~ PTA Membership Committee Chairperson  
724-774-5729

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## Central Valley PTA 2009-10 Membership Drive

### Membership Information Requested

*(Please Print)*

Name(s): \_\_\_\_\_ Email: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

*(Note: For Kindergarten children please mark either K-AM or K-PM grade; if you are a teacher, write TEACHER on the form)*

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**Form of Payment:**      Cash    or    Check      Check #: \_\_\_\_\_      **Payment Amount:**    \$ \_\_\_\_\_