



JOIN LPES PTA TODAY!!!

20__ - 20__ Membership Form

Fee is \$8

Please Make Checks Payable to Lower Pottsgrove PTA

Parent Name: _____

LPES Teacher/Staff? Y N

Student Name: _____

Teacher: _____ Grade: _____

Email: _____

Address: _____ Pottstown, PA 19464

Phone: _____

Collected By _____	Cash\$ _____ Check # _____	Added to Membership Database _____	Sent To PA PTA on: _____
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Contact us at LowerpottsgrovePTA@gmail.com

Like us on Facebook: Lower Pottsgrove PTA

Join online @ <https://lowerpottsgroveelementary.memberhub.store/>

**WE WANT
YOU!
EVERY
MEMBER
COUNTS!**



PTA[®]
everychild.one voice.[®]

Meeting Dates: