





Membership Form

A) ADULT /STAFF

Please fill out this form and return to the PTSA mailbox in the front office. Per Person: **§6.25 OR Cash/Check Discount \$6.00**

Name:			Home #	Cell #	
				Zip	
			if any of the following apply		
□Parent	□Grandparent	☐Other Family Member	□Community Member	□Past LMS PTSA President □Staff	
B) Othe	er Family Men	nber:			
Name:			Home #	Cell #	
				Zip	
		Please indicate	if any of the following apply		
□Parent	□Grandparent	☐Other Family Member	□Community Member	□Past LMS PTSA President □Staff	
C) Stu			ut this form and return to t	the PTSA mailbox in the front office. Checks Discount \$4.00	
Student's	Nama			-	
Student's Name:					
Student's Name: Student's Name:					
		u like to be a student repres			
	• <i>1</i>	Information provided will o	nly be used by Largo Mide	dle School PTSA	
•	Like us on Fac	cebook at Largo Middle Sc	hool PTSA to keep update	d on our programs and events	
•	For more info	rmation, you can contact yo	our PTSA President at LM	SPresidentPTSA@gmail.com	
			blease make payable to LM		
FOR PTS#	A USE ONLY:	# of Adults/Staff	# of LMS Students	\$ Amount of Cash Donation	
Rec'd by		_ Date Payment Rec'd			
Card: Issue	e Date	Delivered by De	livery Method	Delivery Date	