

**REMINDER – WE WANT YOU.....
To Join ROHS PTSA**



**PTSA - STAFF Membership Form
2018-2019**

Your help is appreciated.

This form can be turned in at the office

Last Name _____

First Name _____

Room Number/Grade _____

E-Mail Address _____

Number of memberships _____ X \$7.00 = _____

Make check payable to ROHSPTSA. Place payment in an envelope labeled PTSA MEMBERSHIP in the office by October 1st. Thank you for your support! Please check out the website for our club sponsorship forms as well.

If you have any questions, please call or email:

Maryanne VanHaitsma: 586-419-0033 or rohsptsa.raven@gmail.com

PTA USE: Check # ----- Cash -----

Visit us on Facebook and join on line through the PTSA Website via memberhub
<https://rohsptsa.memberhub.store/shopping/categories/2775>