

**UNION HIGH SCHOOL PTA  
FACULTY/ STAFF  
YEARLY MEMBERSHIP APPLICATION 2015-2016**

Staff/Name: \_\_\_\_\_ Dept \_\_\_\_\_  
Amount Paid: \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_ (\$6.00 Per Adult Joining)  
Please list any children attending **UNION HIGH** in the spaces below.  
Name: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade \_\_\_\_\_  
Name: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade \_\_\_\_\_  
\*\*\*\*Email address: \_\_\_\_\_

Please make checks payable to **UNION HIGH SCHOOL PTA**, and return in a sealed envelope marked **UHS PTA MEMBERSHIP** to the main office.

If you have any questions please call Leslie Laurino (908) 472-7739 [llaurino@comcast.net](mailto:llaurino@comcast.net)  
**\*PLEASE REMEMBER TO INCLUDE A VALID EMAIL ADDRESS TO RECEIVE CARD!!!!!!**

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