



YES! I/WE WANT TO JOIN THE WEST SEATTLE HIGH SCHOOL PTSA!

YOU CAN ALSO JOIN ONLINE AT <https://wshsptsa.org/join-us/membership>

YES, I WILL JOIN!

- \$15 – Individual membership
- \$25 – Household membership
- \$50 – Business membership
- FREE – Student membership
- Scholarship assistance requested (completely confidential)
 - 100% assistance requested
 - Partial assistance requested. I can pay \$ _____ (PTSA will cover any balance)

YES, I WILL DONATE!

- I would like to donate to support PTSA memberships for other families \$ _____
- Enclosed is an additional tax-deductible donation of \$ _____ to support WSHS!

***Member Type:** Parent/Guardian Teacher/Staff Student Community Partner/Business

*Contact Name: _____

*Email: _____

*Phone: _____ OK to text? Y/N

Address: _____

City, State, Zip: _____

Second Contact Name (for household membership): _____

Second Contact Email: _____

Second Contact Phone: _____ OK to text? Y/N

Student #1 Name: _____ Grade: _____

Student #2 Name: _____ Grade: _____

Student #3 Name: _____ Grade: _____

*Required fields

PLEASE RETURN THIS FORM BY MAIL

West Seattle High School PTSA, 3000 California Ave SW, Seattle, WA 98116
Questions? Email membership@wshsptsa.org

