

2009-2010 Maria Hastings Elementary School Directory Listing & PTA Membership

Section 1: Directory Information

All contact information is for the personal home use of those within the Maria Hastings community, and is not to be used as a source for commercial, political, charitable or any other solicitation.

Please complete your child's name and contact info *exactly* as you want it to appear. If your child uses a nickname very different from school records, please note the formal name so we can match entries with the school records.

	<u>Last Name</u>	<u>First Name</u>	<u>2009-10 Grade</u>	<u>Name on School Records (if different)</u>
Student 1:	_____	_____	_____	_____
Student 2:	_____	_____	_____	_____
Student 3:	_____	_____	_____	_____

Please enter parent/guardian contact information. If you **do not** want your address or phone listed, leave blank. Please list primary residence first.

Household 1: _____ & _____ / _____ - _____
First name Last name if different First name Last name if different Area code & phone

_____ Address _____

_____ E-mail address (for directory, classroom, and school use only) Please include me on the Hastings listserve

Household 2 (if applicable): _____ & _____ / _____ - _____
First name Last name if different First name Last name if different Area code & phone

_____ Address _____

_____ E-mail address (for directory, classroom, and school use only) Please include me on the Hastings listserve

Section 2: PTA Membership & Directory Ordering

Your PTA dues include membership in the state/ national PTA and support many Hastings initiatives, including discretionary checks to classroom teachers and specialists, mini-grants for teachers, field trip scholarship funds, the school newsletter (STAR), after-school clubs, ACT (Arts Created Together) programs and the school directory. Thank you for your generous support! We aim for 100% Hastings PTA Membership.

I wish to join the Hastings PTA [PTA Member Name(s)]: _____
If dues are a hardship, check box at right and they will be waived:

I do not wish to join the PTA at this time. I do not wish to receive a directory.

PTA dues and one copy of directory: \$ 25.00 _____ additional directories at \$5 each: \$ _____
 Additional contribution to the PTA: \$ _____
 Total Check Amount: \$ _____ Check #: _____

Please make checks payable to *Hastings PTA*, with student's name on memo line. PTA is not responsible for lost cash.

Section 3: Permission to Publish Address of Child

We cannot publish the address of a minor without a parent/guardian signature, even if it is the same as last year.

 Parent/guardian signature Date

Section 4: PTA Fall Volunteer Opportunities

I am interested in the following PTA activities:
 (No obligation; volunteer coordinators will contact you.)

- | | |
|--|---|
| <input type="checkbox"/> Publicity | <input type="checkbox"/> Communication |
| <input type="checkbox"/> ACT (Arts Created Together) | <input type="checkbox"/> One Shot Volunteer |
| <input type="checkbox"/> Fall Fundraising | |

Please return completed form with check by Sept. 30 to: **Heidi Pasternak, 51 Ward Street, Lexington, MA 02421**