

Date _____
 Check # _____
 Cash _____
 Addl donation _____



Radford High School Parent Teacher Student Organization (PTSO) Membership/Volunteer Form

Mother/Guardian Name: _____
Last First

Father/Guardian Name: _____
Last First

Teacher/Staff Name: _____
Last First

Home Phone Number: _____ **Cell Phone Number:** _____

Address: _____

City: _____ **Zip:** _____ **Email:** _____

Children attending Radford High School:
Names: _____ **Grade:** _____

Membership dues are only \$10 per family; checks are payable to "Radford PTSO".

PTSO/School Volunteer Interests

Mom	Dad	School Volunteer Programs
		PTSO Board Member/Chairperson
		Fundraising
		Computer – Work on website
		Scholarship Committee
		Teacher Grant Committee
		PTSO Sponsored Dance assist
		Teacher and Staff Appreciation Luncheon
		Baked Goods
		School Beautification
		Faculty Projects
		Resources – talents/interests we can call upon (sewing, painting, etc)
		Work at home – projects that can be done at home
		Clerical (Library, Registrar, Counselors, Administration)
		Project Graduation
		Other:

Please check one of the following to help us understand your intended involvement in the PTSO:

_____ I agree to participate in one of the PTSO's fundraising events.

_____ I would like to know more about ways I can help.

_____ I do not wish to attend meetings or participate on any committee, but would like to join the PTSO to show my support for my child's education. (You will receive occasional e-mails reminding you of PTSO sponsored events and minutes from the general membership meetings.)

This form (along with payment) may be dropped off at the Administration Office at Radford High School or mailed to Radford HS PTSO c/o Radford HS, 4361 Salt Lake Blvd., Honolulu, HI 96818