

PTO Membership Form

Your Involvement Counts!

- Help create strong connections between home, school, and community
- Know what is happening at school and in the community
- Have a voice for your child and all children
- Help support educational programs at RBSMS



Yes, I want to join the PTO!
Enclosed is \$5.00 for membership dues.

Name _____
Address _____
City _____ State _____
Zip _____ Grade _____
Phone _____
Email _____
Child's Name _____
1st Period Teacher _____
I am a: Parent _____ Grandparent _____
Community Member (Name your organization)



Please fill out this form, include your payment,
and return to RBSMS.