

## **Newport Coast Elementary PTA**



## Newport Coast Elementary PTA Membership 2013-2014

## **And School Directory Order Form**

Your membership in the NCE PTA is important! As a PTA member, you have an opportunity to participate and have a voice in our children's school. Our PTA funds teacher supply allowances, computer supplies and office supplies. We fund and coordinate such programs as Art Masters, the Pacific Symphony's Class Act, Author's Festival, Reflections, Green Team, Red Ribbon Week, Teacher and Staff Appreciation, the produce cart and much more.

We invite everyone to attend our PTA Association meetings. MPR doors open at 8:30 a.m. and meetings start at 9:00 a.m. This year's meetings are on September 19, November 21, January 16, March 20, April 17 and May 15.

Please complete both sides of this form. Make your check payable to "NCE PTA" and write the student name(s) on the check. We appreciate your support of the NCE PTA. We also gladly accept extra donations and will use them to support our teachers and programs ~ thank you!

Please check one of the following:		
Our directory information is the same as last year. (No teachers. Just complete student and PTA membership na		
We are new to NCE, need to make changes or were not it form.	ncluded last year. P	lease complete the
No, please do not add our family to the NCE School Direct	cory.	
MEMBERSHIP		
\$25 – Two (2) memberships and a Directory	x \$25 =	\$
\$8 – PTA member (No Directory)	x \$ 8 =	\$
\$12 - Extra Directories (with paid membership only)	x \$12 =	\$
\$ - Additional Contribution to PTA		\$

\*\*\* Please make your check payable to "NCE PTA" and include student name(s) on check\*\*\*



**TOTAL** 

Return this completed form and your payment to the front office at school or mail to: NCE PTA c/o Sharil Childers, 5 Cavaillon, Newport Coast, CA 92657

Please complete the student and PTA membership names on the reverse side of the form.



YOUR DIRECTORY INFORMATION	
STUDENT(S):	
CHILD: Last Name: First Name:	
GRADE:	
CHILD: Last Name: First Name:	
GRADE:	
CHILD: Last Name: First Name:	
GRADE:	
ADDRESS:	
Parents/Guardians: Please write how you would like to be listed in the Directory.	
FATHER Last name: First Name:	
MOTHER Last name: First Name:	
Phone Numbers: Home:	
Work: Dad's: Mom's:	
Cell: Dad's: Mom's:	
<u>E-mail</u> : Dad's: Mom's:	
Parent address ( <b>if different</b> ) from child's. (Please circle: Mother ~ Father)	
Name:	
Address:	
	-
PTA Membership Card Information	
Names:	

Directory Questions? Please contact Brigid Cianfrani at brigidc@cox.net

Directories should arrive in October and will be delivered in your oldest child's backpack