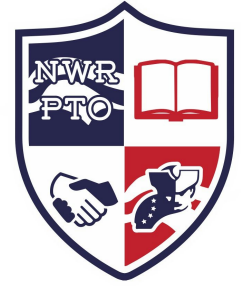


2015-2016 NWR PTO Membership Form



Join Our Mission!

“Through its commitment to education, North Warren PTO will foster a positive relationship among the school, community, and students which will engage and empower every child to reach his/her potential.”

Name(s): _____

Address: _____

Phone: _____

Email: _____

Student: _____ Grade: _____

Student: _____ Grade: _____

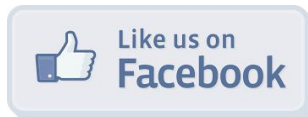
Student: _____ Grade: _____

Return your completed PTO Membership Form to the main office. Please include your \$10.00 membership fee per family. Make checks payable to “North Warren PTO.” Please contact northwarrenpto@gmail.com with questions.

Thank you for your support!

**Please join us at the FIRST NWR PTO Meeting on
Wednesday, October 7th @ 7pm in the Cafeteria
Child Care Available**

*****Future meetings will be held on the 1st Wednesday of every other month and are subject to change.*****



Paid on _____ via: Check # _____ / Cash _____

Tax Exemption Status - Pending