2021-22 PHSA Membership Form

Please mail completed form to :PHSA P.O. Box 1938 Pendleton, OR 97801 OR give to any Board Member

PLEASE fill this form out completely. All information is needed for returning members as well as new members.*

Parent's Names:			
Address:			
City:State:Zip:			
Email:Phone:Cell Pho			
I want to join the Secret PHSA Facebook Page: Yes/No Group texting to my cell phone is a			
Children's Names:	DOB	Age:	Sports
Ciliuren's Names.	ров	Age.	Sports
* To participate in the Sports program the Child must turn 9 by the end of May participating Sports Families are required to facilitate a Sports activity.	. The Parent	s of	
The Bylaws require every family to assist/organize at least one activity per ye	ar.		
Mark one subscription type plus sports if participating: **checks and mone	v orders made	out to PH	SA
Only Please. Any returned check fees levied against PHSA will be the responsibility of the check willight will be the responsibility of the check will be the responsi			
Marsharship Fas July 1, June 20	¢25.00		
Membership Fee July 1- June 30 Early Bird Membership Fee July 1- June 30 (Mailed by July 30 th)	\$25.00		
Sports Fee Sports is on hold until we know more about how the	\$20.00		
fall will look. Payment for sports will be required when we start up again			
ı (we), the undersigned, have read and agree to uphold the bylaws of t		on Ho	me
School Association and I (we) acknowledge that any photograph or vid			
participating in PHSA activities may be used for outreach, education, of		-	-
PHSA. By my signature below, I (we) agree to hold harmless, release, a			-
its officials, and volunteers from liability for property damage and/or p		=	17

resulting from my(our) participation in PHSA.

Signature: _____