



Become a member of the
Kula School PTA
www.kulapta.org



Make a difference, sign up now!

Kula School PTA Membership Form 2020-2021

1st Member Name: _____ (\$20 individual annual membership)

Email: _____ Address: _____

Phone: _____

(circle): Parent/Guardian Faculty/Staff Community Member

2nd Member Name: _____ (\$30 annual membership for 2 in same family)

Email: _____ Address: _____

Phone: _____

(circle): Parent/Guardian Faculty/Staff Community Member

We accept cash and checks (payable to Kula Elementary School PTA)

PTA USE (circle one and enter amount/date):

CASH PMT RECEIVED _____
amount/date

CHECK PMT RECEIVED _____ check# _____
amount/date