



Highcrest PTO Membership Form 2009 – 2010 School Year

Student's Name (s)

_____ Teacher _____

_____ Teacher _____

Parents' Names _____

Address _____

email _____

Family Membership (\$25/family, includes one school directory) \$ _____

Additional Directories (\$5/directory) \$ _____

Total Amount Paid \$ _____

Please make check payable to Highcrest PTO. Complete this form and bring it to school or mail it along with your check to:

Highcrest Middle School PTO
Attn: Membership
569 Hunter Road
Wilmette, IL 60091