



APA-PTSO Membership and Directory Registration Form 2023-2024

- Membership is \$25.00 for 1 year or \$90.00 for 4 years (**save \$10.00!**).
 - Make checks payable to "UCAPA-PTSO".
 - List Student's name on check.
- Questions? Contact: Kathleen Healy at apaptsomembership@gmail.com
- **PREVIOUS ONE-YEAR MEMBERS:** Please make sure to re-join **before** November 1, 2023
- Please consider making a **Donation** to the APA-PTSO in addition to your membership dues

Thank you in advance for your participation and generosity.

PLEASE BLOCK PRINT LEGIBLY WITH DARK PEN FOR EASE OF READING & GREATER ACCURACY.

* STUDENT NAME, GRADUATION YEAR, MAJOR WILL BE AUTOMATICALLY LISTED IN THE DIRECTORY.
ITEMS CHECKED "YES" WILL ALSO BE ADDED TO THE DIRECTORY

Student's name: _____

Graduation year: (circle one): **2027 2026 2025 2024**

Major: (circle one): Theatre * Dance * Tech

Additional Permission needed to put in directory*

Street address: _____	Yes _____	No _____
City/ZIP code: _____	Yes _____	No _____
Student cell #: _____	Yes _____	No _____
Family phone # (land line): _____	Yes _____	No _____
Parent/Guardian # 1:		
Name: _____	Yes _____	No _____
Cell #: _____	Yes _____	No _____
Email: _____	Yes _____	No _____
Parent/Guardian #2		
Name: _____	Yes _____	No _____
Cell #: _____	Yes _____	No _____
Email: _____	Yes _____	No _____

Parent/Guardian's signature: _____ **Date:** _____

Membership Dues \$ _____

Other Donation \$ _____

Total Check Amount: \$ _____ **Check #:** _____ **Total Cash:** \$ _____

For Office Use Only: # of years: _____

Rec'd by: _____

Date: _____

Mail completed form and payment to:
UC APA PTSO
P.O. Box 273
Fanwood, NJ 07023
Attn: Kathleen Healy