

STUDENT FINANCIAL PARTICIPATION FORM

Student Name _____ Grade _____ Teacher _____

In trying to keep the accuracy of each student's purchases, please check off each item purchased and write one check per item. Please, **DO NOT INCLUDE MORE THAN ONE STUDENT PER CHECK**. Please make sure to completely and properly fill-out each form accompanying this sheet (unless otherwise stated) for which you are sending in money or we will be unable to process your order. Please make checks payable to Del Cerro PTA. Please make sure your child's name, teacher's name and your phone number are on the check. Student receipts will be distributed in the Spring.

ONE CHECK PER ITEM PLEASE

PTA MEMBERSHIP

○ Single-\$10.00 Family-\$20.00 CHECK # _____ AMOUNT _____

PREMIER PLANNER (4TH thru 6th only)

○ \$6.00 CHECK # _____ AMOUNT _____

SCIENCE LAB FEE

○ K-6TH -\$5.00 PER STUDENT CHECK # _____ AMOUNT _____

OPTIONAL FUNDRAISER BUY-OUT

○ \$200.00 CHECK # _____ AMOUNT _____

DONATIONS (ANY AMOUNT ACCEPTED) CHECK # _____ AMOUNT _____

TOTAL AMOUNT OF ALL CHECKS \$ _____

FOR PTA USE ONLY-DO NOT WRITE IN THIS AREA

Checked by:

Date:

Amount Recorded: