



Kingsview PTSA 2013-2014 Membership Form

Mother/Guardian First Name:	Father/Guardian First Name:
Mother/Guardian Last Name:	Father/Guardian Last Name:
Mailing Address:	Mailing Address(if different):
Phone Number:	Phone Number:
Email Address:	Email Address:
<input type="checkbox"/> Please add my email address to the Kingsview Listserv	<input type="checkbox"/> Please add my email address to the Kingsview Listserv

Student Name: 1.	Grade:	First Period Teacher:
2.		
3.		

Please check one:

<input type="checkbox"/> Panther Partner Membership \$15	<input type="checkbox"/> Panther Patron Membership \$50	<input type="checkbox"/> Panther Platinum Membership \$100
Individual Membership Includes one voting adult Includes one student directory	Family Membership Includes two voting Adults Includes one voting Student Recognition as a <i>Panther Patron</i> in the student directory Includes one student directory Includes one KMS magnet	Family Membership Includes two voting Adults Includes one voting Student Recognition as a <i>Panther Platinum</i> in the student directory Includes one student directory Includes one KMS magnet Includes two KMS insulated cups

- ❖ Student memberships are available for \$10 each.
- ❖ Membership forms must be received by September 30, 2013, in order to receive Directory recognition.

Please return this form to the main office, their first period teacher or mail to:
Kingsview Middle School PTSA 18909 Kingsview Rd. Germantown, MD 20874

Please make checks out to Kingsview PTSA
Contact Andrea Stenberg, VP Membership and Fundraising with any questions- andrea.stenberg@verizon.net
You can also join online at <http://www.kmspts.org/membership>



Kingsview School Directory

Opt Out Form

2013-2014

THIS FORM SHOULD ONLY BE FILLED OUT IF YOU *DO NOT* WANT TO HAVE YOUR CHILD'S INFORMATION APPEAR IN THE KINGSVIEW SCHOOL DIRECTORY OR IF YOU WOULD ONLY LIKE PARTIAL INFORMATION PRINTED. IF WE DO NOT RECEIVE A FORM BY 9/30, THE INFORMATION WILL BE AUTOMATICALLY INCLUDED IN THE DIRECTORY.

All Kingsview students will be listed in the directory. Only PTSA members will receive a copy of the Kingsview School Directory.

Student Name: _____

Grade: _____ First Period Teacher: _____

DO NOT print the following as indicated below (check all that apply) –

_____ **DO NOT** Print name

_____ **DO NOT** Print address

_____ **DO NOT** Print phone number

_____ **DO NOT** Print e-mail address

Thank you for helping the PTSA distribute an accurate Kingsview School Directory. If you have questions or concerns, please contact Andrea Stenberg at andrea.stenberg@verizon.net.

Sincerely,
Andrea Stenberg
VP Membership and Fundraising