

Ocean Lakes High School  
**PTSA**<sup>®</sup>  
*everychild.onevoice.*  
2009-2010 Membership Form

**Adult Members @ \$6.00 each**  
 **Student Members @ \$3.00 each**                      **Total Amount \$** \_\_\_\_\_

Member's Name: \_\_\_\_\_  
First Last  
(Please Circle One):    *Parent/Guardian*    *Student*    *Teacher*    *Staff*    *Other*

Email Address: \_\_\_\_\_

Member's Name: \_\_\_\_\_  
First Last  
(Please Circle One):    *Parent/Guardian*    *Student*    *Teacher*    *Staff*    *Other*

Email Address: \_\_\_\_\_

Member's Name: \_\_\_\_\_  
First Last  
(Please Circle One):    *Parent/Guardian*    *Student*    *Teacher*    *Staff*    *Other*

Email Address: \_\_\_\_\_

**Student's Name:** \_\_\_\_\_  
First Last Year of Graduation

**Student's Block 1A Teacher's Name:** \_\_\_\_\_

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**"I/We would like to volunteer occasionally!"** (Please check all those that interest you. Thanks!)

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Baking</b>                      | <input type="checkbox"/> <b>Donating Sodas, Candy, Snacks, etc.</b> |
| <input type="checkbox"/> <b>Assisting with Gradfest</b>     | <input type="checkbox"/> <b>Helping with Concessions</b>            |
| <input type="checkbox"/> <b>Becoming a Committee Member</b> | <input type="checkbox"/> <b>Other</b> _____                         |

**Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Deliver this form along with your cash or check to the main office at school, or mail it to **OLHS PTSA, 885 Schumann Drive, Virginia Beach, VA 23454**. We thank you in advance for your continued support of the PTSA!