

## PARENT PTG REGISTRATION FORM 2018-2019

**FAMILY NAME:** \_\_\_\_\_

\_\_\_\_\_ **PTG annual assessment fee of \$55.00 per family for the 2018-2019 school year.**

*(This fee is used to enrich our children's education with special presentations, host our family social events, offset school publicity costs and host receptions for special events for all grades, throughout the year.)*

\_\_\_\_\_ **PTG Classroom Fee \$10.00 per child for the 2018-2019 school year**

*(This fee goes to the classroom budget and is used to offset the cost of class parties as well as to "treat" our wonderful teachers/aides with back-to school and birthday gifts.)*

<b>Example:</b>	Smith Family	\$55 Family Fee
	Joe Smith, Gr.2	\$10 Classroom Fee
	Jane Smith Gr. 4	\$10 Classroom Fee
	<u>Total PTG Dues</u>	<u>\$75</u>

**\*\*\*\* PLEASE INCLUDE BOTH FEES IN ONE CHECK**

*All the "extras" that add to our school environment come from the PTG dues, not the school budget. PTG dues are non-refundable. Make check payable to "St. Raymond PTG"*

**Family Name:** \_\_\_\_\_ **\$55**

**Child 1 First & Last Name/Grade:** \_\_\_\_\_ **+ \$10**

**Child 2 First & Last Name/Grade:** \_\_\_\_\_ **+ \$10**

**Child 3 First & Last Name/Grade:** \_\_\_\_\_ **+ \$10**

**Child 4 First & Last Name/Grade:** \_\_\_\_\_ **+ \$10**

**Child 5 First & Last Name/Grade:** \_\_\_\_\_ **+ \$10**

**Total Amount Owed:** \_\_\_\_\_

\_\_\_\_\_ **Office Use Only** \_\_\_\_\_

PAID \$ \_\_\_\_\_ cash \_\_\_\_\_ check# \_\_\_\_\_