



Lexington Elementary PTO

Membership Form

Adult Names

Address

E-mail

City

Zip

Phone #

Alternate Phone #

Relationship to school: ☐ Parent ☐ Grandparent ☐ Community Member ☐ Staff Member

Student(s)

Grade

Teacher

Even just an hour of help is appreciated at our events!

I'd like to help with ☐ Trick-Or-Treat

☐ Bingo

☐ Color Run

☐ Book Fair

☐ Winter Social

☐ Food Baskets

☐ Call me when you need help ☐ Sorry, I don't have time to help

Please return all completed membership forms to the LEX Office



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