

# SHAW ELEMENTARY

707 PURPLE SAGE  
MESQUITE, TX 75149  
972-882-7060

# Join the Shaw PTA!

**BE EMPOWERED.** Being a member of the Ruby Shaw PTA provides opportunities to network with parents, teachers and school administrators.

**BE RESPONSIBLE.** Use your PTA membership to become a part of the solution, influencing positive changes in your child's education, health, and safety.



"...Blackboards, music class, and gym supplies are things public schools can no longer take for granted. Our school's PTA stepped in to help provide valuable resources for our children." - **PTA Dad, Memphis, TN**

"PTA has made a positive impact on our students' academic success and a difference in our schools and communities."  
- **School Administrator, Cleveland, OH**

# POWERFUL.

For more information on how to get involved, visit [www.rubyshawpta.org](http://www.rubyshawpta.org) or email [shawptapresident@gmail.com](mailto:shawptapresident@gmail.com).

\*\*\*Please turn the page over to complete your PTA enrollment!\*\*\*

# Ruby Shaw PTA MEMBERSHIP Form 2016-2017

Complete this form and return with \$6.00 for each member  
Complete esta formulario y devuelva con \$6.00 para cada miembro

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Teacher:** \_\_\_\_\_  
Nombre del estudiante \_\_\_\_\_ Grado \_\_\_\_\_ Maestro \_\_\_\_\_

**Siblings attending Shaw: (each child will be credited with the memberships listed below)**  
Hermanos que asisten a Shaw: (a cada niño se le acreditarán los miembros a continuación)

**Sibling #1:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Teacher:** \_\_\_\_\_

**Sibling #2:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Teacher:** \_\_\_\_\_

**Sibling #3:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Teacher:** \_\_\_\_\_

PTA Member Name:	<u>Member Type:</u>	Parent Padres	Student Estudiante	Community Comunidad
Nombre de Miembro _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PTA Member Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PTA Member Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Address:** \_\_\_\_\_  
Dirección \_\_\_\_\_

**Zip Code:** \_\_\_\_\_ **Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_  
Código Postal \_\_\_\_\_

**Email Address:** \_\_\_\_\_  
Dirección de correo electrónico \_\_\_\_\_

Please make checks payable to "Shaw PTA"

Thank You So much for being a part of the  
Ruby Shaw PTA!!!