



Lahainaluna High School PTSA
(Parent, Teacher, Student Association)
 980 Lahainaluna Road
 Lahaina, HI 96761
lahainalunapta@gmail.com

Check#: _____
Amount: \$ _____
Rec'd By: _____
Date: _____

PTSA Membership Application

The Lahainaluna High School PTSA is affiliated with the Hawaii State PTSA and National PTA. The Lahainaluna High School PTSA consists of parents, teachers, staff, students, and community members, who are concerned with the well being of our students and our school. The mission of the Lahainaluna PTSA is to bring together families and educators to achieve each child's potential. PTSA membership provides you an opportunity to become an active part of your school community. Please join us in making a difference this year in the education, health, and safety of our community's children.

Dues for a one school-year membership are \$20.00 per person. Additional members are also \$10 per person/ per year and can be signed up below. You are welcome to sign up multiple family members.

(Payments accepted in cash or check. Completed forms and payments can be dropped off at the school office or mailed to Lahainaluna PTSA, 980 Lahainaluna Road, Lahaina, HI 96761.)

Name: _____ Phone: _____

Email Address: _____

Mailing Address: _____

Preferred Method of Contact: (check one or both) Phone/Text Email

If you're a parent of a Lahainaluna student, please list your student(s) name(s) & current grade level(s) here:

Additional Members (\$20 each)

MEMBERSHIP DUES TOTALS	
Total # of Members _____	x \$20 = \$ _____
Optional Donation*	\$ _____
(*Donations go directly towards our fundraising budget)	
TOTAL RECEIVED \$ _____	
(We accept cash or checks made out to Lahainaluna PTSA.)	

I am interested in volunteering for Lahainaluna PTSA activities. Please contact me with opportunities.

-----FOR OFFICE USE ONLY-----

Date Membership Cards Issued: _____ () At sign up, () By mail, () In person, () Via school mailbox

Notes: _____
