



– Sagemont Upper School PTO Membership –

_____ **\$40** YES, our family would like to support the PTO for the 2019-2020 school year.

– Faculty and Staff Gift Program –

_____ **\$85** YES, please include my student in the Faculty and Staff Gift Program. I understand this will cover gifts twice during the school year (holiday time and individuals birthday).

– OR –

_____ **\$135** YES, please include my students (two or more) in the Faculty and Staff Gift Program. (This applies to families with more than one child at the upper school campus).

One check does it all.

Total Check Amount: \$ _____ Check Number: _____

Parent's Names: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Student's Name: _____ Grade: _____

Student's Name: _____ Grade: _____

Student's Name: _____ Grade: _____

Student's Name: _____ Grade: _____