



**2007-2008 Daviess County Middle School
PSTO MEMBERSHIP FORM**

Membership and support are vital to the DCMS PSTO. Your active participation enables us to promote programs and activities which recognize and support our students and teachers. The Renaissance Rallies, Student Rewards parties and Staff Appreciation programs are just a few of the examples of the benefits your membership provides at DCMS. **THANK YOU** for helping to make your child's middle school experience the best that it can be!

Parent(s) Name:			
Address:			
City/State/Zip:			
Phone numbers:	Daytime:	Evening:	
	Cell:		
Best time to call	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Email address:			

CHILDREN ATTENDING DCMS:

Name	Grade	Homeroom Teacher/Team

- My employer offers matching funds for PSTO membership**

Employer: _____

Employee name: _____

Membership fees are \$5 for family or \$3 for single parent

I would like to make an additional donation to the PSTO in the amount of \$_____.

Total paid \$_____ Check#_____ Cash_____

Please make checks payable to DCMS PSTO