

# IMAGINE SCHOOL AT BROWARD



## PARENT TEACHER ORGANIZATION (P.T.O.) Family Membership Form

There is strength in numbers! Please join our **Parent Teacher Organization** and help support our school. **Membership Dues are just \$10 per family per year.** 100% of the dues collected are put back into our school and spent on enhancing school programs for the benefit of all of our children.

**Please complete the form below and return with your casher check payment.**  
(Make checks payable to: **ICSAB, PTO**)



*The first class to reach 100% PTO membership will receive a PTO sponsored pizza party and a \$50 gift card to ACE Educational Supplies.*

*All other classes with 100% PTO membership will receive an ice cream party!*

*Please complete the information below. Please complete only ONE form per family, even if you have more than one student registered at ISAB. However, be sure to list all children with their respective teachers and grade level.*

**PLEASE PRINT CLEARLY**

Parents' Name (s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade/Teacher: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade/Teacher: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade/Teacher: \_\_\_\_\_



**Check this box if you paid via Square Up. Please provide your Square Up email address below:**

Email: \_\_\_\_\_

**\*NOTE: If you paid via Square Up, your membership is NOT COMPLETE until we receive this document.**

**\*NOTE: There is also a convenience fee of \$3 per transaction. We suggest you order everything in 1 transaction online.**

<http://www.squareup.com/store/imaginebroward-pt>

*To submit your completed form, please do one of the following:*

1. Email & scan completed form to [imaginebrowardpto@gmail.com](mailto:imaginebrowardpto@gmail.com) w/ PTO MEMBERSHIP in subject line

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2. Print and send in your completed form to your student's teacher in an envelope marked **"PTO MEMBERSHIP"**.

**Imagine Charter School At Broward, P.T.O.**

Visit us on the web at: [www.imaginebroward.org](http://www.imaginebroward.org)

Contact us at [imaginebrowardpto@gmail.com](mailto:imaginebrowardpto@gmail.com)

For Office Use Only:

Payment Type: PayPal/Cash/Check #: \_\_\_\_\_

Payment Received by: \_\_\_\_\_