Bear Creek HS PTSA Membership Form

Member Name: __________________________________________________________

Email Address: __________________________________________________________

Phone Number: __________________________________________________________

Check One:  Student _____    Parent _____    Staff _____    Community _____

If Student, Grade: ____

PTSA Membership is $10 per person. Additional donations are welcome. Checks can be made payable to BCHS PTSA.

Please return form and payment to school office in envelope marked “PTSA.”

May also be mailed to:
Bear Creek High School PTSA
9800 W Dartmouth Pl
Lakewood, CO 80227

Any questions? Contact bearcreekhsptsa@gmail.com

PTSA use only: Amt Pd $____  Check # __________  Cash ________  CC________