



**Saxony Lutheran High School
All School Booster Club
Membership Form**

Please return this form along with your annual membership dues, \$20 per family, to the school office to the attention of SAXONY BOOSTER CLUB

Name (s): _____

Address: _____

Email (Dad): _____

Email (Mom): _____

Home Phone: _____ Work Phone (Dad): _____

Work Phone (Mom): _____ Cell Phone (Dad): _____

Cell Phone (Mom): _____

SLHS Student: _____ Grade: _____

SLHS Student: _____ Grade: _____

SLHS Student: _____ Grade: _____

I AM INTERESTED IN HELPING WITH THE FOLLOWING EVENT(S):

Opening Reception/Back to School Night (August): _____

Ford Drive 1 (Sept/Oct): _____ East Perry Fair Fish Stand (Sept): _____

Graduation Reception (Freshman Class –May): _____ Chili Supper: _____

Banquets - Spring: _____ Fall: _____ Winter: _____

Concession Stand - Inside: _____ Outside: _____

Senior Breakfast (Junior Parents Only – May): _____

Sell Logo Items: _____

For Booster Use Only:

Single Family Cash Check
Check # _____