

# SUPPORT FARMWELL STATION MIDDLE SCHOOL

## BECOME A PTA MEMBER TODAY!

Dear Farmwell Station Families and Friends:

Farmwell Station Middle School PTA is dedicated to making our school the best environment for educating our students. By supporting the PTA and joining as a member, you will help fund many important programs, services, and capital improvements for Farmwell Station. Specifically, your \$20 family membership will provide our school with classroom and technology resource materials, school beautification projects, library enhancements, 8th grade field day, and so much more!

\*\*\* Membership Requires No Time Commitment! \*\*\*

### *We have two ways to join:*

Option 1: Online membership form with PAYPAL. Enter [www.lcps.org/farmwell](http://www.lcps.org/farmwell), click on PTA tab. In the green left-side navigation menu, click on JOIN THE PTA and follow the instructions on the form.

Option 2: Complete this form and enclose with your payment of \$20 in an envelope marked PTA Membership. You may either mail the bottom half of this form or your child may place it in the PTA Membership box in the main office. Cash or checks made payable to FSMS PTA are both welcome.

If you have any questions, please contact the PTA President at [president@fsmstva.org](mailto:president@fsmstva.org).

Please note donations to the FSMS PTA are welcome in any amount and are tax deductible! All funds go directly to benefit the students at Farmwell Station. We truly appreciate your support. THANK YOU!

Sincerely,

PTA Membership Chair

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Complete form and send payment to: Farmwell Station Middle School, 44281 Gloucester Parkway,  
Ashburn, VA 20147 Attn: PTA Membership

Member Name(s): \_\_\_\_\_

Members Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Office Use Only: Amount Paid: \_\_\_\_\_ Membership: \_\_\_\_\_ Donation: \_\_\_\_\_

Paid By: Cash \_\_\_\_\_ Date: \_\_\_\_\_ (or) Check # \_\_\_\_\_ Date: \_\_\_\_\_