

 **OPT Membership Form**   
**(2017-2018)**

\$10 Family Membership (Includes membership for all Parents/Guardian's per family, voting rights at OPT monthly meetings, *NEW!* Oakdale School Student and Faculty Directory, and update information on how to participate in OPT school activities.

PLEASE PRINT

Parent/Guardian Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Contact Preference(s) (Check all apply):    Email \_\_\_ Call Home Phone \_\_\_

Call Cell Phone \_\_\_ Text \_\_\_

Student Name #1    \_\_\_\_\_    Grade \_\_\_    Teacher \_\_\_\_\_

Student Name #2    \_\_\_\_\_    Grade \_\_\_    Teacher \_\_\_\_\_

Student Name #3    \_\_\_\_\_    Grade \_\_\_    Teacher \_\_\_\_\_

Directory Release of Information

Please Check One (if applicable):

OPT may use all my information on this form to use in Oakdale Student and Faculty Directory

OPT may use only my Phone Number and Email Address in Oakdale Student and Faculty Directory.

**X** \_\_\_\_\_

PARENT/GAURDIAN SIGNATURE

Cash or Checks can be made payable to OPT

Please return form and money to any OPT member or Mrs. Pryor. Forms may also be returned to your child's teacher.