



CBHS FFA Booster Club

2019-2020 Membership Form

Parent Name:	Parent Name:
Preferred Phone:	Preferred Phone:
Email:	Email:
1. Student Name:	Grade:
2. Student Name:	Grade:
3. Student Name:	Grade:
4. Student Name:	Grade:

Membership:
<input type="checkbox"/> \$25 Family Membership Dues
<input type="checkbox"/> \$ _____ Tax Deductible Donation (optional)

Photo Release:
<input type="checkbox"/> Yes, you may use photos of my child for Facebook, end of year presentations or other FFA related use.
<input type="checkbox"/> No, you may NOT use photos of my child for Facebook, end of year presentations or other FFA related use.

Parents, We will be looking for various levels of support throughout the school year. This will include financial, time, experience, positive morale, and other various needs you may be able to bring to our FFA program. Please let us know if you are available to assist with:

- | | | |
|--|---|---|
| <input type="checkbox"/> Membership Committee | <input type="checkbox"/> Fundraising Committee | <input type="checkbox"/> Nominating Committee |
| <input type="checkbox"/> Scholarship Committee | <input type="checkbox"/> Alumni Chapter Committee | <input type="checkbox"/> Banquet Committee |
| <input type="checkbox"/> Corporate Sponsorship | <input type="checkbox"/> Donation Solicitation | <input type="checkbox"/> Competition Transportation |
| <input type="checkbox"/> Major Show Support (snacks, driving, etc) <input type="checkbox"/> CCISD Livestock Show | | |

Parent Signature: _____ Date: _____

Seniors: Membership must be submitted by November 1st to be considered for the Booster Club Scholarship.

Booster Club Use Only: Date Dues Paid _____ ☐ Cash ☐ Check # _____