



**2017-2018
Membership Form**

Engaging the community to enrich our students' experience.

Parent/Guardian Full Name(s):	
Street Address	
City / Zip	
Phone	
Email:	
Student's Name(s):	
OPTIONAL: Engraved message • For the \$125 Membership Option • NO MORE THAN 44 Characters (including spaces)	

Please join us as we strive to have 100% of our families support the Parent Club, which supports YOUR student and Rocklin High School staff.

	\$25	Other _____
	\$50 (Includes RHS stainless steel water bottle)	<i>(any amount is appreciated)</i>
	\$125 (Water bottle + become a "Rock Solid" Supporter by having your name engraved on RHS Monument)	



	YES , I would love to volunteer in some way, please have the committee chair contact me with additional information.
	YES , I have expertise/skills in a particular area and am willing to share my knowledge or talents. Write area here _____

Please submit this form with your membership check for donation, payable to RHS Parent Club, to the front office. If you prefer, you may also join and donate online at www.rhsparentclub.net

Membership fees/donations are tax deductible (Tax ID# **68-0294148**) as RHSPC is a registered non-profit organization. Receipts are available upon request. For questions, please email us at: rocklinhighschoolparentclub@gmail.com