

Salado FFA Booster Club

Membership Application

We are better when we work together.

| Primary Member Name: Email: Phone Number: | | | |
|--|--------------------------|----------------|-------|
| | | Student's Name | Grade |
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| I am interested in being an active volunteer for the booster cle | uh events this year | | |
| ☐ Absolutely! | as events this year. | | |
| ☐ Possible- can I get more information | | | |
| $\ \square$ I am unable to volunteer at this time but can help with donati | ons | | |
| ☐ I am unable to be an active volunteer at this time | | | |
| ☐ Other: | | | |
| Membership fee of \$10 can be paid cash or check payable to | Salado FFA Booster Club. | | |
| Contact Us: | | | |
| SaladoFFABC@gmail.com | | | |
| f SaladoFFABooster | | | |
| saladoffabooster | | | |