PJ Gelinas Junior High School

PTSA Membership Application

2024-25

Parent/GuardianName_____

Student Name_____Grade_____

Parent/Guardian Email Address

Parent/Guardian Cell Phone

Faculty Member Name_____

Please send this form and a check for $20 made out to **PJ Gelinas JHS PTSA** with your student to the Main Office, or mail to Gelinas PTSA, 25 Mud Road, Setauket, NY 11733.

All members will receive email updates about events and activities at school. You will also be invited to join our Facebook page.

-or-

Thank you for your support!