

Half Hollow Hills SEPTA Membership Form 2017-2018



HHH SEPTA
Executive Committee
2017-2018

Dear HHH Families:

Co-Presidents:
Caryl Deiches
Maria Perisa

VP Membership:
Laurie Tow

Treasurer:
David Ng

Secretary:
Stacey Barone

Council Delegates:
Barbara Shannon
Michelle Cooke

We hope everyone had a fun filled summer! SEPTA stands for Special Education Parent Teacher Association. As a district-wide PTA, our primary function is to act as a collaborative voice for all children with special needs and all neuro-diverse learners. SEPTA provides information, education and support for all families. We strive to bring together families to exchange information and advocate for the success of all students. **** SEPTA IS A PLACE TO CELEBRATE OUR DIVERSITY! SEPTA IS OPEN TO EVERYONE! ****

Your membership helps us to fund many activities for our children throughout the year, as well as to fund The SEPTA Shining Stars Scholarship Fund, which provides further opportunities for students beyond their years in the district.

Please complete the membership form below and return it with your \$10.00 membership fee to your child's school in an envelope marked HHH SEPTA. We will also accept envelopes at our monthly SEPTA meetings. Meetings are posted on the district website, as well as our website: HHHSEPTA.ORG. You may also stay updated through our Facebook page, Half Hollow Hills SEPTA.

For more information, please contact our VP of Membership:
Laurie Tow at: hi4life222@aol.com

Detach the bottom portion of this page and return with payment.
Please make all checks payable to HHH SEPTA- There is a \$15.00 return check fee.

Last Name: _____ First Name: _____

E-Mail: (required for e-card): _____

Cell: _____ Home: _____

Street: _____ City/Zip: _____

School(s): _____ Out of District: _____

I am a (circle one): Parent Teacher Para Administrator Student Community Member

Would you like to receive emails from HHH SEPTA? (circle one): Yes No

Thank you for your support!

Website: HHHSEPTA.ORG



Find us on
Facebook

APPROVED FOR DISTRIBUTION
AUG 14 2017
KELLY FALLON
SUPERINTENDENT OF SCHOOLS
@Half Hollow Hills SEPTA
AMM 8/11/17

For PTA use only:

_____ of Members	X \$ _____ = _____ Total Due	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	Date: _____
Entered in NYS PTA Online Membership System		Date: _____	