

KOMS P.F.O. MEMBERSHIP FORM & DIRECTORY LISTING FORM

\$10.00
per family or person

Please include the \$10.00 membership fee to join the KOMS P.F.O. and to receive the directory and calendar
(Checks made payable to KOMS P.F.O.)

PARENT/GUARDIAN INFORMATION:

First Name(s): _____ Last Name(s): _____ *

*Please include all parents' names if you wish them to be listed in the directory.

Phone Number for Directory: _____

Address: _____ Zip: _____

E-Mail Address(s): _____

STUDENT INFORMATION: *

First Name: _____ Last Name: _____ Grade: _____ Home Room: _____

First Name: _____ Last Name: _____ Grade: _____ Home Room: _____

First Name: _____ Last Name: _____ Grade: _____ Home Room: _____

*Please note: unless requested your information will be printed in the Directory.
Check no below if you wish to be excluded from the Directory.

_____ **No, I would NOT like the above information to be printed in the KOMS Directory.**

*Calendars will be sent home with your child. Directories will be sent electronically via the e-mail that is provided.
Only families who are P.F.O. members will receive the Calendar and Directory.*

PFO COMMITTEE SIGN-UP SLIP

YES! I want to volunteer my time and talents for the following committees or activities at the KOMS!
(Please select all activities or committees of interest)

_____ *7th & 8th Grade Dance
Chaperone*

_____ *Call me for other PFO
events as needed*

_____ *Dance Decorating
Committee*

_____ *6th Grade Social Chaperone*

_____ *Book Fair*

_____ *Co-Council Representative*

_____ *Fundraisers*

_____ *KO Clothing Sale*

_____ *Sarris Candy*

_____ *Ice Cream Social*

_____ *8th Grade Activities*

_____ *Box Tops*

Name: _____ Phone Number: _____

E-Mail Address: _____

(Above contact will be used to communicate important KOMS information throughout the school year from the P.F.O.)

PLEASE RETURN THIS PAGE TO THE SCHOOL OFFICE