

PLHS PA Booster Board Information

School Year: _____

Name of Organization: _____

Student or campus group to receive the benefit of this fundraising:

Booster Board Members:

PRESIDENT:

Name: _____ Address: _____

Phone: _____ Email: _____

VICE-PRESIDENT:

Name: _____ Address: _____

Phone: _____ Email: _____

SECRETARY:

Name: _____ Address: _____

Phone: _____ Email: _____

TREASURER:

Name: _____ Address: _____

Phone: _____ Email: _____

Contact Person(s)/PLHS PA Board Liaison for this group:

Name: _____ Address: _____

Phone: _____ Email: _____

This information must be updated yearly and on file in the PLHS PA office.

Email to: Arts Booster Director -
or Athletics Booster Director - pointersboosterdir@gmail.com