

**ST. ROSE OF LIMA PTA
51 LINCOLN PLACE
FREEHOLD, NJ 07728**

Dear Parent/Guardian,

Please complete the following form and return it to school with your registration papers. Thank you for your cooperation.

Sincerely,
Stacy Harrison, Treasurer
St. Rose of Lima PTA

Family Name: _____

Address: _____

Telephone: _____

Students: _____

ST. ROSE OF LIMA PTA ACTIVITY FEE: The St. Rose of Lima Activity Fee is used for all our special programs for our children. The fee is \$75 per year, per family. This fee is due with your registration for the upcoming year. Please make checks payable to St. Rose of Lima PTA. Include this paper with your registration. Do not include this amount with other registration fees.

Amount Enclosed: _____ (\$75.00)