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dahs\_ptsa



Division Avenue High School PTSA

The **Division Avenue High School PTSA** welcomes you to a new school year and encourages all parents, guardians, teachers and students to join our PTSA. Our monthly meetings begin in September.

- Join millions of others who advocate for laws that further the education, physical and mental health, welfare, and safety of our children.
- Attend meetings to hear from our executive board as well as the school administrators about upcoming events, school curriculum, and school activities.

### Eligibility Requirements for PTSA SENIOR AWARD

**SENIORS:** Must be paid PTSA members by January 30, 2026 **AND** must make a donation to our Sweeps fundraiser by 2/25/26 (separate check made out to DAHS PTSA Senior Award Fund) **OR** volunteer for Sweeps. Students also must have been a PTSA member at least one additional year prior to their senior year.

**FRESHMAN, SOPHOMORES & JUNIORS:** To be eligible to receive the award in their senior year, students must be a PTSA member at least one of the years prior to senior year. Thereafter, Senior Award rules apply. Membership is strongly encouraged every year to stay informed of all PTSA happenings.

**STUDENTS \$8      STANDARD/STAFF \$12**

**ONLINE PAYMENTS:**

Scan the QR code to go to the online store: [levittownschools.com/division/pta](http://levittownschools.com/division/pta)  
*Please note: Online payments incur a small transaction fee.*



**CASH OR CHECK PAYMENTS:** Enclose bottom portion of this form along with cash or check payable to DAHS PTSA and drop off to school's main office (mark envelope PTSA membership.)

Any questions please contact [DivisionAvePTSA@gmail.com](mailto:DivisionAvePTSA@gmail.com)



MEMBER #1 Information		
NAME:	If Student, Grade:	PHONE:
EMAIL:		Membership Type: <input type="checkbox"/> Adult <input type="checkbox"/> Student <input type="checkbox"/> Staff
MEMBER #2 Information		
NAME:	If Student, Grade:	PHONE:
EMAIL:		Membership Type: <input type="checkbox"/> Adult <input type="checkbox"/> Student <input type="checkbox"/> Staff
MEMBER #3 Information		
NAME:	If Student, Grade:	PHONE:
EMAIL:		Membership Type: <input type="checkbox"/> Adult <input type="checkbox"/> Student <input type="checkbox"/> Staff

Total:\$ \_\_\_\_\_ Check # \_\_\_\_\_