



# Coppel Gifted Association Membership 2020-2021

(Membership is valid from August 15, 2020 to August 14, 2021)

[www.coppelgifted.org](http://www.coppelgifted.org)

Adult Member's Name(s) \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address (Required) \_\_\_\_\_

*Your email address will be used ONLY for CGA communications*

	Child's Name	School	Grade	GT (Y/N)
1)				
2)				
3)				

<p><b>JOIN COPPELL GIFTED ASSOCIATION</b>  <b>Only \$10 Early bird pricing!</b>  <b>Your membership helps support gifted education in Coppel ISD</b>  <b>CGA BENEFITS</b></p> <ul style="list-style-type: none"> <li>• MOSAIC early registration option &amp; discounts</li> <li>• Free admission to CGA Speaker Series</li> <li>• CGA Newsletter</li> </ul> <p><i>Early Bird Pricing of CGA membership at \$10 is valid until September 30, 2020.</i>  <i>Pricing will change to \$20 on October 1, 2020.</i></p>	<p>\$10  (\$20 if on or after 10/1/20)</p>
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**Additional Gifted Education Support** - CGA is a tax exempt organization under IRS Section 501c(3)

**Donations** I would like to donate \$\_\_\_\_\_ to CGA to support gifted education.  
*(Funds will be used for educator training, parent education, and CGA student enrichment)*

**Sponsorship** I would like to honor the following CISD educator at the membership rate of **\$20**:  
 Name: \_\_\_\_\_ School/Campus: \_\_\_\_\_

Total Due: \_\_\_\_\_

Volunteering - I would like to learn more about CGA volunteering opportunities (Circle one) **YES / NO**

Mail this form and your check (payable to "CGA") to: CGA PO Box 2111 Coppel, TX 75019

**Questions?** - [membership@coppelgifted.org](mailto:membership@coppelgifted.org)

OFFICE USE ONLY: Check # \_\_\_\_\_ Cash (initials) \_\_\_\_\_ Date Rec'd \_\_\_\_/\_\_\_\_/\_\_\_\_ Source: Summer/Fall/Early Bird