



PARENTS AND ADMINISTRATORS
TOGETHER HELPING STUDENTS

PATHS MEMBERSHIP FORM

Mission Statement:

To improve academic and leadership achievements among African and African American Students. Working with parents and the school’s administration, we build awareness of various opportunities available as well as challenges our students face. Our goal is to help prepare our students for success in high school, college and life beyond.

Please print

PARENT/GUARDIAN NAME(S): _____

PRIMARY EMAIL ADDRESS: _____ PHONE #: (____) _____

SECONDARY EMAIL ADDRESS: _____ ALT PHONE #: (____) _____

STUDENT’S NAME: _____

STUDENT’S GRADE: _____

STUDENT’S EMAIL ADDRESS: _____

STUDENT’S NAME: _____

STUDENT’S GRADE: _____

STUDENT’S EMAIL ADDRESS: _____

2018-2019 MEMBERSHIP FEE IS \$20.00/PER FAMILY (Membership is REQUIRED to apply for a Scholarship)

Please consider a donation to the PATHS Senior Scholarship Fund.

Membership fee: \$ _____

Scholarship Contribution: \$ _____

Total Payment: \$ _____

Check # _____ Cash _____

Make Checks payable to NVHS, write “PATHS” on memo line and include your phone number on the check.
Mail the form and payment to NVHS-PATHS, 2360 95th St, Naperville, IL 60564 or drop it off at any PATHS event.
For additional info, email us at: NVHSPATHS@gmail.com

THANK YOU FOR YOUR SUPPORT!