



Fox Chapel Middle School Jr. Beta Club Application

(Please Print clearly)

Grade Level _____ Student Number _____ 1st period teacher _____

Last name First Name Middle Initial

Address City/State Zip Code

Father's Name Work Work phone/cell phone

Mother's Name Work Work phone/cell phone

Parent's email address _____

GPA (Grade Point Average) _____

FCMS BETA Club t-shirt (Circle one) S M L XL 2XL (Adult sizes)

I have read and understand the qualifications and requirements for FCMS Beta Club membership:

Student signature Date

Parent/Guardian Signature Date

TURN IN COMPLETED APPLICATION to Ms. Hall, Room 2-06

-with a copy of your report card.

Due Date: November 9, 2017 if you want to join BETA CLUB at FCMS.

Letter of acceptance will be delivered by November 12, 2017.