

West Hartford Special Education PTO (WHSEPTO)

September 2022

Dear Parents, Guardians, Teachers, Administrators and Friends:

West Hartford SEPTO (Special Education Parent/Teacher Org.) invites you to join our dynamic organization, serving the needs of our community. We are a district-wide PTO that supports special education for all the children in our town from Pre-K – High School, at **all** of our 16 schools.

As a member of WHSEPTO, you can be proud to know that membership dues of just \$15 will support YOUR students. This year with your \$15 membership fee you will receive a complimentary copy of our Book Club selection. You are encouraged to read the book and participate in our book discussion.

WHSEPTO also supports YOU!

Do you need help sorting through the maze of people, services, and therapies, etc.?

Are you looking to gain more information so you can advocate for your child more effectively?

Maybe you want to meet other parents within West Hartford who are looking for support or friendship?

This is what we do... Our mission is threefold – to Educate, Advocate and Network.

We do this via:

Information Sessions/Meetings with guest speakers

Social media

Book Club

Online Facebook Parent Support Group

And more!

Please join us by becoming a member of the West Hartford Special Education PTO.

Register online at this PayPal link: <https://bit.ly/WHSEPTOMembership2223>

Wishing you a wonderful school year,

Jennifer Sherman, President

West Hartford SEPTO | P.O. Box 270381 | West Hartford, CT 06127 |



facebook.com/whsepto



[whsepto](https://www.instagram.com/whsepto)

HOPE TO SEE YOU OCT 12TH FOR THE KICK OFF MEETING AT BRISTOW 7-8PM

WEST HARTFORD SPECIAL EDUCATION PTO 2022 - 2023 Membership Registration Form

We welcome you to become a member of West Hartford SEPTO!
Find us at facebook.com/whsepto

There are 2 Easy Ways to Join or Renew your Membership!

1. Register online at this PayPal link <https://bit.ly/WHSEPTOMembership2223>, or use the QR code below.



2. Or you can print and mail this form and your payment to WHSEPTO, Attn: Membership P.O. Box 270381, West Hartford, CT 06127. Please include a check for \$15 made out to WHSEPTO

MEMBER NAME(S): _____

ADDRESS: _____

CELL PHONE: _____ EMAIL: _____

Membership Type: Parent/Guardian Teacher/Admin Community

Check one: New Renewal

OPTIONAL INFORMATION

If a parent/guardian: Name of child receiving services: _____

Birth Year: _____ School: _____

If a teacher/administrator: School: _____ Position: _____

How did you hear about WHSEPTO? Newsletter WHSEPTO function School Other

*** WHSEPTO USE ***

Batch: _____ Date Received : _____ Amount Received _____ Ck ____ Cash ____