



# Become a Member Today!

AVPA's Parents And Patrons of the Arts represents parents & guardians of students from ALL BCA Academies. All monies raised go to support the arts at BCA where students participate in:

- Award winning choirs
- Instrumental music ensembles
- Plays and musicals
- Visual art shows



No matter which academy your student is in, we encourage every student to participate in these great opportunities, and we welcome all parents and guardians to share their ideas, time, and talents. We are a wonderful group who truly enjoy working together and watching our children grow into the well-rounded, confident, and eloquent artists that BCA produces. We offer many volunteer opportunities for parents/guardians who can give **time** and/or **donations** each year. The time spent is rewarding, we have a lot of fun and the entire student body benefits from the efforts of AVPA-PAPA.

Join us at meetings and special events throughout the year or just stay connected via email at [papapresidents@gmail.com](mailto:papapresidents@gmail.com) and on our AVPA-PAPA Facebook and WhatsApp groups.

*For each year you are an AVPA-PAPA member, your student will receive an entry in the AVPA-PAPA \$1,000 Scholarship drawing that will take place at the end of their Senior year.*

Email [papapresidents@gmail.com](mailto:papapresidents@gmail.com) or call/text Kat Baboulis at 201-491-4338 if you have questions or want to get involved.

Scan the QR Code  
to become a  
member today!



**If paying by cash or check, please complete the membership details and include this form with your payment.**

**Student Name:** \_\_\_\_\_ **Academy:** \_\_\_\_\_ **Class of:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Academy:** \_\_\_\_\_ **Class of:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Academy:** \_\_\_\_\_ **Class of:** \_\_\_\_\_

If your student is in AVPA, please circle their specific academy:    **Music**    **Theater**    **Visual**

### Contact Information

Parent 1 Name:

Street Address:

City, State, Zip

Cell Phone Number:

Email Address:

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Parent 2 Name:

Street Address:

City, State, Zip

Cell Phone Number:

Email Address:

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\* Are you able to donate beyond your membership? If so, please consider selecting and including an additional donation with your membership dues.

**Stay in touch by joining our AVPA-PAPA Facebook and WhatsApp Groups!!**