

Eastchester SEPTA Executive Board 2022-23



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Andy Bellach

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Sharon Shearon

VP Digital Media:
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VP Programming:
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Sophie Lipkin

Corresponding Secretary:
Leah Moore

Recording Secretary:
Kate Karol

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Inclusive Athletics:
Mike Bellach
Tommy McDonough

Event Committee:
Teresa Hrivnak
Doreen Napolitano

PTA Council Rep:
Keith Giametta

Eastchester SEPTA Membership 2022-23

Does your child receive any special services? Or are you interested in Special Education? We encourage you to join SEPTA - The Special Education PTA of Eastchester, New York.

What is SEPTA? SEPTA is an organization of interested parents, most with children receiving special services through the district, as well as special education faculty/administration who join together to help all our children reach their fullest potential. Special services range from resource room, classroom aides, occupational/speech therapy, special education classes in district and outside the district. Any parent of a child who receives special services should join SEPTA!

SEPTA's Goals:

- Inform and educate parents via meeting speakers, emails blasts, website
- Support special education/special services faculty and programs
 - **Grants:** available to faculty members who are **active** members of SEPTA
 - Sponsor the **School to Work** program, Canine Therapy, Music Therapy & Unified Sports and After School programs
 - Scholarships to select graduating seniors w/ parents who have been **SEPTA members and are active within SEPTA.**

Join a community of friendship & sharing, with open dialogue between parents of children receiving special services and the faculty and administration providing special services.

To submit your 2022-23 membership form and payment by mail see below or visit us at www.eastchestersepta.org and look for the link on the home or membership page.

To pay \$15 dues by check (see form below) or JOIN ONLINE at eastchestersepta.org/membership

Please submit your 2022-23 membership form and dues of \$15, payable to "EASTCHESTER SEPTA and mail to: Maria Valente | 18 Columbus Circle | Eastchester, NY 10709

Family Name: _____ Phone: _____ E-mail: _____

Your First Name: _____ Your Last Name: _____

Address: _____

Child: (first/last) _____ Grade: ____ School/Teacher: _____

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Would you like to volunteer at one of our events? (Y/N) _____ Are you also a staff member? (Y/N) _____