

MS PTA Local Remittance Form for State & National Membership Dues

Unit Name _____ PTA Unit ID # _____

Local PTA President _____

Address _____ City _____ State _____ Zip _____

Best Phone () _____ Cell Work Home

E-mail address (required) _____

Treasurer _____

Best Phone () _____ Cell Work Home

E-mail address (required) _____

<p>Check One: <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> Other Specify Other _____</p> <p>_____ X \$3.50 (State and National PTA Dues) = \$ _____ <i>Number of Members</i> (1.25) (2.25)</p>

The enclosed dues, covering the period from _____ to _____,
remitted on _____ by check number _____.
(date)

Membership dues should be remitted each month someone joins. Do not wait to send dues. Membership dues should be paid by a PTA check. No cash or personal checks please. Fill out this form completely, write one check to MS PTA for the combined total of state and national dues, then mail this completed form and check to:

**MS PTA
P. O. Box 1937
Jackson, MS 39215-1937**

- Send Unit approximately _____ more cards
(Cards will be mailed to President's address)
- Don't need more cards at this time

Telephone: 601.352.7383
Homepage: www.MissPTA.org • E-mail: MissPTA@ymail.com