

STATE AND NATIONAL MEMBERSHIP DUES

Remittance Form 20__ - 20__

Date	PTA Unit ID (8 digits)
Region	Council
Local PTA/PTSA	
Local PTA President	
Phone number	
Email address	
Local PTA Treasurer	
Phone number	
Email Address	

ELEMENTARY
 MIDDLE
 JR.HIGH
 HIGH SCHOOL
 OTHER

National PTA _____ (# of members) x \$3.25	\$
Utah PTA _____ (# of members) x \$2.75	\$
TOTAL REMITTANCE	\$

Membership dues should be remitted by the 25th of each month.

Please make one check payable to Utah PTA for total remittance amount above.

Membership dues should be paid by a PTA check. No cash or personal checks.

Mail completed form to:

Utah PTA, 5192 S. Greenpine Drive, Murray, UT 84123-4606

The enclosed dues cover the period from _____ to _____

Remitted on _____ (date) By check number _____