

# MS PTA Local Remittance Form for State & National Membership Dues

Unit Name \_\_\_\_\_ PTA 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) \_\_\_\_\_

Check One:  Elementary School  Middle School  High School  Other  
Specify Other \_\_\_\_\_

\_\_\_\_\_ X \$3.50 (State and National PTA Dues) = \$ \_\_\_\_\_  
*Number of Members* (1.25) (2.25)

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

State President: Cynthia Wallace • [cynthiawallace20@comcast.net](mailto:cynthiawallace20@comcast.net)  
State Membership Chair: Judy Johnson-Evans • [jjevans306@comcast.net](mailto:jjevans306@comcast.net)  
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