

STATE AND NATIONAL MEMBERSHIP DUES

Remittance Form 20__ - 20__

Date	PTA Unit ID (8 digits)
Region	Council (if applicable)
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 \$2.25	\$
Utah PTA _____ (# of members) x \$1.75	\$
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 _____