



Deadline 6/15

Date Rec'd \_\_\_\_\_

Check # \_\_\_\_\_

Date \_\_\_\_\_

Amount \_\_\_\_\_

### LOCAL UNIT/COUNCIL OFFICERS & BULLETIN SUBSCRIPTION FORM

**IMPORTANT:** Please return this form to the State Office as soon as your officers are elected and no later than June 15th (return even if you are serving a second term). District/state mailings for your unit will be sent to the school address after August if this form is not returned to the state office. In the event that your PTA's election is held in the fall, you will **need to resubmit** the new officers' information at that time.

**PURSUANT TO CODE OF VIRGINIA FOR NON-PROFITS THE NAMES AND ADDRESSES OF ALL OFFICERS MUST BE KEPT ON FILE WITH THE PARENT ORGANIZATION. IRS REGULATIONS REQUIRE THAT YOUR UNIT'S EMPLOYER IDENTIFICATION NUMBER (EIN) BE KEPT ON FILE WITH THE PARENT ORGANIZATION. THEREFORE WE MUST ASK THAT YOU SEND THE REQUIRED INFORMATION TO THE STATE OFFICE. PLEASE ATTACH ADDITIONAL SHEETS IF NECESSARY.**

**BULLETIN: LOCAL UNITS** - Each Local PTA/PTSA is entitled to 5 free subscriptions. Subscriptions for your Principal and local unit president are included in this number. Please select 3 additional recipients for a free subscription. If you would like to order additional subscriptions, please send payment in the amount of \$10 made payable to Virginia PTA for each addition subscription. **COUNCILS** - Each Council receives 4 subscriptions (one for the council president and 3 additional subscriptions).

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**PLEASE TYPE OR PRINT CLEARLY**

**Officers for the 2008-2009 school year**

Complete Name of PTA or PTSA \_\_\_\_\_

Type (circle one) Prim., Elem., Inter., Jr. High, Middle, High, or Combined \_\_\_\_\_

Location (City or County) \_\_\_\_\_

EIN (Employer Identification Number) \_\_\_\_\_

**PRESIDENT** (circle one) Mr., Mrs., Miss, or Ms. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**TREASURER** (circle one) Mr., Mrs., Miss, or Ms. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Bulletin (yes or no) \_\_\_\_\_

**TITLE** \_\_\_\_\_ (circle one) Mr., Mrs., Miss, or Ms. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Bulletin (yes or no) \_\_\_\_\_

**TITLE** \_\_\_\_\_ (circle one) Mr., Mrs., Miss, or Ms. \_\_\_\_\_

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Board members listing email addresses will be automatically signed up for Virginia PTA's electronic newsletters, VA PTA VOICE, CAPITOL NEWS and Legislation ACTION ALERTS. They may unsubscribe at any time, by following instructions published in every issue.

Please mail, fax or Email to: Virginia PTA  
1027 Wilmer Avenue  
Richmond, VA 23227-2419  
Fax: (804) 264-4014  
Email: info@vapta.org

**PLEASE SEND FORM IMMEDIATELY UPON ELECTION OF OFFICERS**