



APPLICATION FOR ESTABLISHING A NEW LOCAL PTA/PTSA UNIT

New Unit _____ Re-Charter _____

Date: _____

The _____ PTA/PTSA (circle one) hereby makes application for membership in the Idaho Congress of Parents and Teachers, Inc. and encloses:

- \$ _____ (representing state and national dues) for _____ members.
(Membership dues are \$7.50/member, \$4.00/student)
- Listing of all officers and members

Contact Person: _____

Home Mailing Address: _____

Telephone Number: _____

Email Address: _____

Name of PTA/PTSA (circle one): _____

Grades Taught: _____ City: _____ County: _____

School:
Permanent Mailing Address: _____

City _____ State _____ Zip _____ Phone _____

Name of School District: _____

Principal: _____

Telephone _____

Send completed form with enclosures to:

Idaho PTA
PO Box 50009 Boise, ID 83705
Questions? Call the Idaho PTA State Office 208-344-0851
or email to idahoptaboard@gmail.com