

ADDITIONAL MEMBERSHIP CARDS ORDER FORM



Purpose:

Use this form to request additional membership cards.

Instructions:

- Make copies of this form as needed.
- Fill in the information requested below. Please print.
- To receive additional membership cards, your local unit PTA must submit dues for **at least 90 percent** of the number of cards received to date. (Use Dues Transmittal Form in this section for submitting dues.)
- Please allow one (1) week to process mail requests and two (2) days to process pick up requests.
- Cards will be mailed to contact person listed below.
- **Make checks payable and mail to Georgia PTA, 114 Baker Street, NE, Atlanta, GA 30308-3366.**
(A \$30.00 service fee applied for *checks returned for non-sufficient funds.*)

Date		Local Unit ID #	
District	Council	PTA Name	
Contact Person		PTA Position	
Address			
City		State	Zip
Cell Phone		Home Phone	
Email			

Number of Cards Received to Date: _____

Number of Cards Sold to Members: _____

Number of Additional Cards Requested: _____

Dues Submitted to Georgia PTA as of Today: \$ _____

Signature of President or Membership Chairperson: _____

FOR OFFICE USE ONLY		
_____ # of Membership Cards Mailed to Contact	Date _____	Initials _____
_____ # of Membership Cards Picked Up by Contact		
Notes:		