



LOCAL UNIT/COUNCIL OFFICERS & BULLETIN SUBSCRIPTION FORM

PURSUANT TO CODE OF VIRGINIA FOR NON-PROFITS 57-49.5, THE NAMES AND ADDRESSES OF ALL OFFICERS MUST BE KEPT ON FILE WITH THE PARENT ORGANIZATION. IN ADDITION, IRS REGULATIONS REQUIRE THAT YOUR UNIT'S EMPLOYER IDENTIFICATION NUMBER (EIN) BE KEPT ON FILE WITH THE PARENT ORGANIZATION.

IMPORTANT: Please complete and return this form to the Virginia PTA State Office as soon as your officers are elected, but **no later than June 15**. You must also complete this form even if this is your second term. Failure to complete this form by June 15 will result in a disruption in services provided by Virginia PTA such as district and state mailings, electronic communications and other services and benefits.

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.

All information that you supply to us is considered to be the proprietary and confidential information of Virginia PTA and is not shared or sold to any outside party.

BULLETIN SUBSCRIPTIONS:

LOCAL UNITS - Each PTA/PTSA is entitled to five (5) free subscriptions to the Virginia PTA quarterly newsletter, *The Bulletin*. Subscriptions for your school principal, local unit president and treasurer are automatically included in this number. You can identify up to two (2) additional recipients to receive a free subscription to this publication. If you would like to order additional subscriptions, please remit payment to Virginia PTA in the amount of \$10.00 for each additional subscription.

COUNCILS - Each Council receives four (4) subscriptions – one for the council president and three (3) additional subscriptions, as designated by the council president.

Board members listing email addresses will automatically receive Virginia PTA's electronic newsletters, *Virginia PTA VOICE* and *ACTION ALERTS*. You may unsubscribe at any time by following instructions published in every issue.

Return completed forms by 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.

DEADLINE JUNE 15

Date Rec'd _____

Check # _____

Amount \$ _____

OFFICERS FOR THE 2008-2009 SCHOOL YEAR

PLEASE TYPE OR PRINT CLEARLY

COPY AND ATTACH ADDITIONAL SHEETS AS NEEDED

FOR OFFICERS' INFORMATION AND/OR BULLETIN SUBSCRIPTIONS

Complete Name of PTA or PTSA _____

Type (select School level) _____

Location (City or County) _____

EIN (Employer Identification Number) _____

PRESIDENT (Select one) Select Salutation _____

Address _____

City _____ Zip Code _____

Work Phone _____ Home Phone _____

Email Address _____

Bulletin (Select Option): Select Option

TREASURER(Select Option) Select Salutation _____

Address _____

City _____ Zip Code _____

Work Phone _____ Home Phone _____

Email Address _____

Bulletin (Select Option): Select Option

TITLE _____ (Select Option) Select Salutation _____

Address _____

City _____ Zip Code _____

Work Phone _____ Home Phone _____

Email Address _____

Bulletin (Select Option): Select Option

TITLE _____ (Select Option) Select Salutation _____

Address _____

City _____ Zip Code _____

Work Phone _____ Home Phone _____

Email Address _____

Bulletin (Select Option): Select Option