



everychild.one voice.

Oregon PTA Business Partners

MEMBERSHIP APPLICATION AND SUBSCRIPTION FORM

Please provide the following information:

Business name: _____ Phone: (____) _____

Representative name: _____ Title: _____

E-mail address**: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

PTA Partners Membership:

(*Membership includes Oregon PTA's **onevoice** e-newsletter and a PTA Business Partners window cling.)

_____ Basic - \$50.00

_____ Neighbor* - \$100.00

_____ Friend* - \$250.00

_____ Advocate* - \$500.00

_____ Founcer* - \$1000.00

_____ Other - _____

* Includes **Our Children** subscription – National PTA's magazine. Published nine times per year and includes program and activities information for and from PTAs. Also includes *What's Happening in Washington*, National PTA's Legislative Newsletter that disseminates timely legislative information on PTA-related issues.)

Additional Contributions:

\$	Founder's Day – used to provide services that strengthen PTA leadership, increase membership, improve programs, and stimulate action on critical issues.
\$	New Unit/Council Development Fund – used to assist communities in forming new PTA/PTSA units and councils.
\$	Leadership Training Fund – used to provide training and leadership resources to local PTAs.
\$	Legislative Action Fund – used to increase advocacy efforts across the state in a variety of areas that affect the health and well-being of Oregon's children.
\$	Oregon PTA President's Travel Fund – used to increase Oregon PTA's presence in key arenas around the state.
\$	Teacher Education Scholarship Fund – disbursed to Oregon students, attending an Oregon college or graduate program, preparing to teach in Oregon at the primary and/or secondary school levels.

Total Enclosed: \$ _____

Mail check payable to "Oregon PTA" to:

Oregon PTA
Attention: PTA Partners
4506 SE Belmont St.; Suite 108-B
Portland, Oregon 97215-1658

(Contributions to Oregon PTA are tax-deductible.)

For Office Use Only:

4501(MD)_____ 6811(OC)_____ 4100(FD)_____ 6520(NU)_____ 4005(LT)_____ 4035(LA)_____
4022(PT)_____ Recorded By:_____ Date:_____ Check #:_____