



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 [info@idahopta.org](mailto:info@idahopta.org)