*cada***niño.***una***voz.**

**MEMBERSHIP & DUES**

**REPORTING FORM**

**Purpose:** Use this form to report membership and send dues from the Local Unit PTA to the Delaware PTA office.

**Instructions:**

* Fill in the information requested below. Please print. Keep a copy of this form for your records.
* Calculate amount of dues at $4.25 per **member**
* Email Membership Excel spreadsheet (as an excel file) to **Membership@delawarepta.org****. This is found on delawarepta.org under PTA Leaders/Forms Library.**
* Membership must be reported **monthly** whenever new members have joined**.**
* Once form, payment and excel spreadsheet have been received, membership cards will be processed.

**Make checks payable and mail to the Delaware PTA, 925 Bear-Corbitt Rd, Bear, DE 19701-1323.**

Date Local Unit ID #

Region PTA Name

Name of Local Unit PTA/PTSA President

Address

City State Zip Code

Daytime Phone E-Mail

Name of Local Unit PTA/PTSA Treasurer

Address

City State Zip Code

Daytime Phone E-Mail

Local Unit EIN (Employer Identification Number) issued by the IRS

**DUES ARE PAYABLE ON OR BEFORE: The last business day of each month**

This payment covers dues received from to

**DUES CALCULATION**

Dues are **$4.25 per member** per year ($2.00 for Delaware PTA and $2.25 for National PTA). If your unit offers a family membership, you must determine how many members are included in that family membership. You **MUST** report **each member** at $4.25 and issue a membership card to each member of the family whose name appears on the enrollment form.

**Number of members**  **at $4.25 each** = $

**Membership achievements are celebrated at the Delaware PTA Annual Convention. In order to calculate and determine membership awards the following information is required:**

Student enrollment in the school on September 30th

100% teacher membership has been achieved:  Yes  Not Yet

100% faculty (all school staff) membership has been achieved:  Yes  Not Yet

For Office use only

Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check Number\_\_\_\_\_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received Amount Received Check Number