

Postmarked by
March 15

INDIVIDUAL MEMBERSHIP ACHIEVEMENT

SPRING PARTNERSHIP ACHIEVEMENT (Must be a PTA or PTSA member) ENTRY FORM

Name of PTA/PTSA _____ Unit # _____

Name of Council _____ PTA Area # _____

School District _____ City _____

Name of Local PTA President _____

Address _____ City/ZIP _____

Telephone # _____

Name of Award Recipient (please print) _____

Address _____ City/ZIP _____

Telephone # _____

Signature of local Membership Chairman _____

Please list the members recruited by the award recipient for verification:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Mail to: **Membership—Award Entry**
 Texas PTA
 408 W. 11th St.
 Austin, Texas 78701-2113

Postmarked by: **March 15**

NOTE: This award is intended for an **individual PTA/PTSA member (adult or students in grades 9-12)** who recruits 10 or more members.

**PLEASE DO NOT SUBMIT THIS REPORT FORM
UNLESS YOU ARE ELIGIBLE FOR THIS AWARD.**