

PTA/PTSA Unit Officer Information Sheet

School Year: _____

Information must be in the Oklahoma PTA Office by **October 31st** of the current school year or the unit will **NOT** be in good standing.

Remit this form to the Oklahoma PTA office immediately following your elections. This form must be received in the state office **no later than October 31st** for a unit to be considered "in good standing" with the State PTA and National PTA. Officer information must be updated every school year. This is Oklahoma PTA's primary way to update the mailing list for the important information we send.

Mail to: Oklahoma PTA, 2801 N. Lincoln Blvd., Suite 214, Oklahoma City, OK 73105
Fax: 405-681-0736 Email: director@okpta.org Phone # 405-681-0750

Full Name of PTA/PTSA Unit: _____ School District: _____

Type of school (check all that apply): Elementary Middle Jr. High Sr. High Combined

School Address: _____ County: _____

School Phone: _____ PTA Region: _____ EIN (Tax ID #): _____

National ID#: _____ Council (if applicable): _____

President: _____

Vice President: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone #: _____

Phone #: _____

E-mail: _____

E-mail: _____

Secretary: _____

Treasurer: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone #: _____

Phone #: _____

E-mail: _____

E-mail: _____

Reflections: _____

Membership: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone #: _____

Phone #: _____

E-mail: _____

E-mail: _____

Legislative: _____

President-Elect: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone #: _____

Phone #: _____

E-mail: _____

E-mail: _____

Additional officers and board members may be attached or listed on the back of this page.

If your PTA/PTSA does not hold an election for officers until school begins, please send the name of a Contact Person to keep important information coming to the unit.

Name of Contact Person: _____ Phone #: _____

Address: _____ City/State/Zip: _____

E-mail: _____