

Cover Submittal Form for Local Unit Membership Report

Date	Colorado PTA Region	Council			
Student Population (i.e. K-5, 6-8, K-12, PK, etc.):			or 🗖	Community	
School Distri	ct:	Type School:	☐ Public ☐ Priva	te	
☐ Charter ☐	Early Childhood				
PTA/PTSA U	Init Name				
PTA/PTSA A	ddress / Zip				
Name of Mer	mbership Chair (or President, if a	ipplicable)			
Mobile Phone	e	_ E-mail			
School inform Total nu	nation umber of full time Staff at schoo	I		_	
• Total S	tudent enrollment this year			_	
Unit Members	ship Report: [NOTE: A member m	av be counted in	only one (1) catego	rv1	
	r of Parent members on this rep	ort		-71	
 Numbe 	r of Staff members on this report all full time and part time certified and	t			
 Numbe 	r of Community members on thi	s report	·····		
 Numbe 	r of Student members on this re	port			
n an effort to be	etter know our state's PTA mem	ber representation	on, please provide	the following:	
• Total nu	umber of Male/Female members	on this report _	Male	Female	
1. Numb	per of new Individual Membership	os this report	x \$ 6.25 = 3	\$	
2. Numb	per of new Business Partners this	s report	x \$10.00 =	\$	
	ENCLOS	ED [TOTAL 1 + 2	2] = \$		
LEADERSHI	IP TRAINING: (See page 6 of the	e Local Unit Han	ndbook, www.cop	ta.org/officers	
	Educa				
	Educa				
	Educa				
INSTRUCTION					

- Mandatory membership reports are due to the Colorado PTA office postmarked no later than October 1 and February 1. Additional membership reports may be sent to the Colorado PTA office as needed.
- If your PTA is using memberplanet to manage its membership, mail this report with the payment. If your PTA is not using memberplanet to manage its membership, mail this report with the payment and email the Membership Listing report.
- Check made payable to "Colorado PTA" [with two signatures] must accompany this report or invoice.