



everychild.one voice.

The Kansas PTA invites you to join

Kansas Golden Oaks Parent Teacher Association - State Unit

The Kansas Golden Oaks Parent Teacher Association - State Unit is a PTA unit for people who may not have a local PTA unit to affiliate with or for those wishing to show additional statewide support. It is for anyone who is interested in the well-being of children and youth.

By becoming a member of the Kansas Golden Oaks State Unit PTA, you will impact the lives of the children in your community and Kansas. Your support will help enable PTA volunteers throughout the state and nation to further their efforts on behalf of children; to increase communications between home and school; and to more actively involve and educate a greater number of parents, educators and community members so that we may collectively meet the needs of all children and youth.

When you join the Kansas Golden Oaks State Unit PTA, you become a member of Kansas PTA and National PTA and join millions of others who care about issues that affect children. Each member will receive registration information for all Kansas PTA trainings including the annual Kansas PTA Convention and is invited to sign up to receive our Bulletin on our website at www.kansas-pta.org.

Membership is open to anyone concerned with the education, health, and welfare of children and youth.
JOIN TODAY!



Please complete the following information and send to:

Kansas PTA State Office
715 SW Tenth Street, Topeka, KS 66612

Member 1: _____ Member 2: _____

Member 3: _____ Member 4: _____

Address: _____
Street City State Zip Code

Phone _____ Email address _____

YES! I'd like to join the Kansas Golden Oaks State Unit PTA! Annual dues of \$6.50 includes:
Membership in the Kansas PTA and the National PTA. Membership is valid 7/1/16-6/30/17.

YES! I'd like to make an additional donation to Kansas PTA.

Please contact me. I have contact information about potential donors/sponsors for Kansas PTA.

I have enclosed a check for my total

____ Memberships at \$6.50 per person

____ Donation to Kansas PTA

\$ _____ TOTAL AMOUNT ENCLOSED

FOR OFFICE USE ONLY

Date: _____

Check Cash Square

Amount: _____

Check # _____

Notes: _____
