



Unit name: _____

Michigan ID# _____

Number of membership cards received: _____

Date received: _____

Signature: _____

This form is to verify that you received your additional membership cards. Please count your cards when you receive them, complete the above information and mail or fax this form back to us. It will be kept in your file as documentation. This form will be sent each time you request additional cards. This will ensure that our records remain as consistent as possible with yours throughout the year and alleviate problems with membership counts at the end of the year. If there is any discrepancy between our records and yours, this documentation will serve as the official record. Therefore, please be sure to return this form to ensure that your unit receives the awards and recognition it deserves!

Thank you for your cooperation!

Michigan PTSA
7402 Westshire Drive, Suite 115
Lansing, MI 48917-8687
Fax: (517) 622-4788
Additional card requests can be emailed to:
membership@michiganpta.org



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