

**SHARE HOW YOUR LOCAL PTA UNIT PROMOTED MEMBERSHIP!**

**Award Criteria**

- Application forms must be complete and received by the Tennessee PTA no later than February 15th.
- PTA Unit must be in good standing as of February 15th
- A descriptive narrative in addition with a limit of 500 words must include:
  - Description of membership campaign
  - Logo and graphics used
  - Incentives and Goals
  - Awards or Prizes
  - Community Involvement
  - Results

Category (Choose only one)

Elementary

Middle/High

Community/Non-Traditional

Name of PTA \_\_\_\_\_

National ID \_\_\_\_\_

Name of PTA Region \_\_\_\_\_

Name of PTA President \_\_\_\_\_

Name of Membership Chair \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone Number \_\_\_\_\_

Membership Slogan or Theme \_\_\_\_\_

What was your membership count on November 1st? \_\_\_\_\_

What was your membership total as of February 1st? \_\_\_\_\_

Did you use Givebacks store to collect memberships? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe any membership training received from a Council, Tennessee PTA or National PTA?

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Did a local elected official proclaim PTA Membership Month in your area? Yes \_\_\_\_\_ No \_\_\_\_\_

**Winners will:**

Receive recognition during the annual meeting event.

**This application plus the descriptive narrative  
must be received by the Tennessee PTA no later than February 15th.**

Tennessee PTA  
5006 Jim Jones Lane  
Knoxville, TN 37931

**FOR OFFICE USE ONLY**

Received Date \_\_\_\_\_  Narrative Included

Good Standing Status

Number of Members Submitted as of February 15 \_\_\_\_\_

Date of Bylaws Approval \_\_\_\_\_

990 Submitted

Audit Submitted