
Parliamentarian: Name _____
Address _____
City/State/Zip _____
Email Address _____
Telephone _____
 Work Home Cell Work Home Cell

Membership: Name _____
Address _____
City/State/Zip _____
Email Address _____
Telephone _____
 Work Home Cell Work Home Cell

Reflections: Name _____
Address _____
City/State/Zip _____
Email Address _____
Telephone _____
 Work Home Cell Work Home Cell

Principal: Name _____
Address _____
City/State/Zip _____
Email Address _____
Telephone _____
 Work Home Cell Work Home Cell

Other: Name _____
Address _____
City/State/Zip _____
Email Address _____
Telephone _____
 Work Home Cell Work Home Cell

NOTE: Even if 1 or more officers **DO NOT** change from year to year –
This list **MUST BE SUBMITTED** by 6/1/2011.

PLEASE SUBMIT TO WEST VIRGINIA PTA OFFICE by 6/1/2011.
ALSO, SEND NEW LIST ANY TIME OFFICER(S) CHANGE.

MAIL TO: West Virginia PTA
P. O. Box 3557
Parkersburg, WV 26103-3557

FAX: 304/420-9577

EMAIL: wv_office@pta.org
