

Name _____

Address _____

City _____ Zip _____

E-mail _____

I wish to pay by **Check** (*Make check out to California State PTA*)

VISA **MasterCard**

Credit Card Number _____ Exp. Date _____

Name of Card Holder _____

Signature _____

Please send me information on how I can become a PTA member

Yes, count me as a Friend of the California State PTA.

_____ Founders' Circle (\$1,000+)

_____ Golden Circle (\$500-\$1000)

_____ Silver Circle (\$250-\$499)

_____ Bronze Circle (\$100-\$249)

_____ Friend of PTA (Other)

Send to:

California State PTA
2327 L Street
Sacramento, Ca. 95816

Contributions are tax-deductible