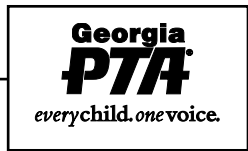


# INCORPORATION REQUEST FORM



**Purpose:**

Use this form to request that Georgia PTA incorporate your local unit PTA.

**Instructions:**

- Fill in the information requested below. Please print.
- Attach a check in the amount of \$170.00 to this form. Georgia PTA will forward \$100.00 to the Secretary of State’s office for the initial incorporation fee, \$40.00 for the publication notice and \$30.00 for the annual registration fee.
- Georgia PTA will bill your local unit annually in January for the \$30.00 renewal fee.
- Refer to the *Financial Management* section of this resource for more information on incorporation.
- **Make checks payable and mail to Georgia PTA, 114 Baker Street, NE, Atlanta, GA 30308-3366.**

Date		Local Unit ID #	
District	Council	PTA Name	
Contact Person		PTA Position	
School System			
School Address			
City		State	Zip

President		
Home Address		
City	State	Zip
Daytime Phone	Email	

Treasurer		
Home Address		
City	State	Zip
Daytime Phone	Email	

President’s Signature \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
Amount Received \$ _____	Date Received _____
<input type="checkbox"/> Check/Money Order # _____	<input type="checkbox"/> Cash