



## National PTA Life Achievement Award Order Form

*(Please print and use one order form per honoree)*

We: (Name of PTA) \_\_\_\_\_

In: (City) \_\_\_\_\_ (State): \_\_\_\_\_

Daytime Phone Number: (\_\_\_\_\_) \_\_\_\_\_ **Date of Presentation:** \_\_\_\_\_

**Would like to honor:** (Please print full home address)

Dr. / Mr. / Mrs. / Miss / Ms.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please send Life Achievement Award and other items to:** (Street address only, we cannot ship to P.O. Box)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: (\_\_\_\_\_) \_\_\_\_\_

*Please allow 3-4 weeks for processing*

**National PTA Life Achievement Award**

**\$125**

*(Includes shipping materials First Class, unless special handling is required)*

**Special Handling Fee**

**\$10**

*(Must be included for each order that requires processing and shipping less than three weeks from order postmark date)*

**Total Amount** (enclose this amount)

\$ \_\_\_\_\_

To Mail: Mail order form and a check or money order to:

**National PTA**

**1250 N. Pitt Street, Alexandria, VA 22314**

**Attn: Life Achievement Awards**

To Pay by Credit Card: (Check one) \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ AMEX

Name on Card: \_\_\_\_\_

Card number: \_\_\_\_\_ CVC: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature: \_\_\_\_\_

**To Fax: (703)836-0942, Attn: Life Achievement Awards**

**Call (800) 307-4782 \*3122 or email [membership@pta.org](mailto:membership@pta.org) with questions.**