



**"Open your Business with West Virginia PTA"
Business Partner Enrollment Form**

Date _____

Business Name _____

Type of Business _____

Represented by _____

Address _____

Phone: _____ E-mail _____

Signature _____

Partnership is valid for one year

OUR PTA is 501(c) (3) NON PROFIT BUSINESS PARTNERS ARE TAX DEDUCTIBLE

For PTA use only:

Date received _____ Amount received \$ _____

Please submit Enrollment Form to West Virginia PTA, Post Office Box 3557, Parkersburg, WV 26103 along with payment made payable to WV PTA. If submitting multiple businesses, please complete separate forms for each business. Any questions or concerns, please do not hesitate to contact membership@westvirginiapta.org.