



**UNITED PARENT COUNCIL**  
**Membership Registration for 2007-2008**



Complete information and return with check to United Parent Council c/o Community Resource Center, 15032 N. 32<sup>nd</sup> Street, Phoenix 85032. To maintain voting privileges, **please respond by September 26, 2007**. Submission of this form grants permission to include this information in the UPC Directory.

**School Membership \$75.00**      **School Name:** \_\_\_\_\_

**Parent Group President :** \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Day/Time/Location of parent group meetings: \_\_\_\_\_

**School Council Parent Representatives (Names & E-Mail addresses):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**UPC Representative #1:** \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**UPC Representative #2:** \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

<b>UPC Alternate #1 :</b>	<b>UPC Alternate #2:</b>
Name: _____	Name: _____
E-Mail: _____	E-Mail: _____
Phone: _____ - _____ - _____	Phone: _____ - _____ - _____
Address: _____	Address: _____
City: _____ Zip: _____	City: _____ Zip: _____

**General Membership \$15.00**      **Name:** \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

For Treasurer's use:      CK# \_\_\_\_\_      Date Rec'd \_\_\_\_\_