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ILLINOIS PTA LOGOS

Please complete the following form, to request permission to use the Illinois PTA logos for newsletters, letterhead, etc. Return the form to the Illinois PTA.

The _____ PTA of _____
(Name of PTA) (City where PTA is located)

PTA District _____

requests to use the Illinois PTA logos for _____

If there are any questions concerning the request, the state office will contact you within two weeks of completed form being received in the state office, otherwise permission is granted for your PTA to use the logos for one year.

Name _____

PTA Position _____

Telephone Number _____

Date _____

**Return to:
Illinois PTA
P. O. Box 907
Springfield, IL 62705-0907
Fax: 217-528-9490
Email: ilpta@ameritech.net**