

# Area 2 Gwinnett County Council of PTAs 2016 – 2017 Committee Chair Profile Form

**PLEASE SUBMIT THIS FORM ON/BY AUGUST 31, 2016**

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Area 2 – Gwinnett Council



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LOCAL UNIT PTA/PTSA INFORMATION	
<b>PTA/PTSA NAME</b>	
<b>LOCAL UNIT #</b>	<b>CLUSTER</b>
<b>PRESIDENT'S NAME</b>	
<b>PHONE</b>	<b>EMAIL</b>
<b>CO-PRESIDENT'S NAME</b>	
<b>PHONE</b>	<b>EMAIL</b>
<b>PRINCIPAL</b>	
<b>EMAIL</b>	
<b>LEGISLATIVE CHAIRPERSON</b>	
<b>NAME</b>	
<b>PHONE</b>	<b>EMAIL</b>
<b>MEMBERSHIP CHAIRPERSON</b>	
<b>NAME</b>	
<b>PHONE</b>	<b>EMAIL</b>
<b>HEALTH &amp; WELLNESS CHAIRPERSON</b>	
<b>NAME</b>	
<b>PHONE</b>	<b>EMAIL</b>
<b>FAMILY ENGAGEMENT CHAIRPERSON</b>	
<b>NAME</b>	
<b>PHONE</b>	<b>EMAIL</b>