

# Be on the Front Line of Child Advocacy



The WSPTA is the largest grassroots child advocacy organization in Washington State. We strongly encourage and request your participation in the valuable advocacy work the WSPTA does to enhance the lives of children. Join one or all of the opportunities designed to connect you with decision makers and WSPTA colleagues.

## Legislative “Talk”

- **YES** \_\_\_\_\_ Sign up for the WSPTA Legislative Listserv. This is a two-way listserv used by members to discuss advocacy topics impacting children and youth that are relevant to the mission of the WSPTA. It is also the vehicle used by the Government Affairs Liaison to distribute the weekly Legislative Update during Legislative Sessions.

## Legislative Action Alerts

- **YES** \_\_\_\_\_ Sign up for the WSPTA Legislative Action Alert. This is a one-way electronic communication alerting you to fast breaking happenings in Olympia and requesting you to call, email, or write a letter to your legislators on a specific issue that relates to the WSPTA Legislative Platform or Guiding Principles. The Action Alerts are generated from the Government Affairs office and sent out on an average of once a week during Legislative Sessions. They are structured with background, requested action, and a brief message for you to use as a template.

## Grassroots Connection

- **YES** \_\_\_\_\_ Sign up of for the WSTPA Grassroots Connection, an electronic update of legislative matters. Frequency will be determined by the level of legislative activities. The Grassroots connection will provide you with timely, pertinent public policy information on issues affecting children and youth. This is a one way communication.

## Legislative Contact Team

- **YES** \_\_\_\_\_ Sign up to be contacted during legislative session, and agree to make a personal phone call to your Senator or Representative. You will be contacted personally and asked to request specific support on bills, public hearing of a bill or other types of Legislative activity. Please note your legislative district or zip code: \_\_\_\_\_

Please print the following information:

Name: \_\_\_\_\_ Local PTA Unit: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_