



PREFERRED PARTNER OPPORTUNITIES AND BENEFITS

The Preferred Partners Program is Your Doorway to the Growing Charter School Market.

- **700+ Public charter schools in Florida serve over 382,000 students.**
- **Florida is the second largest charter school state in the nation in terms of student enrollment.**
- **The movement continues to grow on an annual basis.**
- **FCPCS charter school members purchase their products from Preferred Partners.**

The Florida Consortium of Public Charter Schools (FCPCS) is the premier statewide membership association for public charter schools throughout the state.

As a FCPCS Preferred Partner, your company becomes part of an exclusive marketplace with access to charter schools, administrators and teachers.

FCPCS believes that by supporting, inspiring and uniting charter schools, improved public education in Florida will become a reality. FCPCS is the only independent channel providing information and resources to Florida's charter schools on a continuous basis.

The Preferred Partners program has been in place since 2001 with both national and local partners (vendors) participating.

Preferred Partners Enjoy These Benefits:

- Name and Logo placement on the FCPCS Website in the Preferred Partners Directory, a virtual shopping mall for FCPCS members
- Web page space for a description of company products, services and contact information
- Opportunities to be included in the Preferred Partners Program e-news which features Preferred Partners only, reaching charter school decision makers, stakeholders and supporters
- Opportunities for company representatives to meet with charter school leaders at events and activities sponsored by FCPCS
- Information on how to participate in the annual statewide Florida Charter School Conference, with sponsorship opportunities
- Preferred Partner information included in the FCPCS Membership Packet sent to all members





PREFERRED PARTNER ANNUAL MEMBERSHIP APPLICATION FORM

1. ORGANIZATION INFORMATION

Organization Name: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Primary Contact: _____ Contact Title: _____

Office Phone: _____ Cell Phone: _____

E-Mail: _____ Fax: _____

Secondary Contact: _____ Contact Title: _____

Office Phone: _____ Cell Phone: _____

E-Mail: _____ Fax: _____

Organization Web Address: _____

Region Served (Statewide, County, City) _____

Application Completed By (Please sign) _____

2. MEMBERSHIP DUES *Please check ONE of the following categories for your business:*

\$2 million or above in revenues	\$1,500
Less than \$2 million in revenues	\$750

3. METHOD OF PAYMENT *Please check ONE of the following payment methods for your business:*

By Check (Please mail application) – Complete and sign the Application Form and mail with check payable to:
Florida Consortium of Public Charter Schools, 1225 SE 2nd Avenue, Fort Lauderdale, FL 33316

By Credit Card (Please email to info@floridacharterschools.org) Visa M/C AM Express

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Print name as it appears on card: _____

Authorized Signature: _____

Credit Card Billing Address (If different from organization address): _____

ZIP: _____

FOR QUESTIONS OR MORE INFORMATION: Please contact FCPCS, at 954-463-9595 or by email at info@floridacharterschools.org

The Florida Consortium reserves the right to deny or revoke membership in its sole discretion.