



Marriotts Ridge PTSA Membership Application 2010-2011

Student(s) Information: (please print clearly)

Last Name	First Name	Grade

Parents' or Guardians' Information: (please print clearly)

Last Name	First Name	Phone	E-mail address

LIST ALL INFORMATION AS YOU WOULD LIKE IT TO APPEAR IN THE MRHS STUDENT DIRECTORY

() Do **NOT** include our information in the MRHS Student Phone Directory (only student's name will appear)

PTSA Membership Rates				
One Adult	\$15	OR	Two Adults	\$25
___ Student(s)	\$5 each		___ Student(s)	\$5 each
Staff	\$5			
Tax Deductible Contribution (optional)	\$ _____			
Additional Copy of MRHS Student Directory (copy complimentary)	\$5 each			
			Total to MRHS PTSA	\$ _____

Signature _____ Date _____

Make check payable to Marriotts Ridge HS PTSA. Membership dues and/or donations are tax deductible.

Your cancelled check is your receipt. Membership in Maryland and National PTA is included in your membership in the Marriotts Ridge HS PTSA.

Please return this form and check to the front office of MRHS: Marriotts Ridge High School, 12100 Woodford Drive, Marriottsville, MD 21104

*This information will **not** be sold to outside organizations.*