

MIDDLETOWN VALLEY ATHLETIC ASSOCIATION

FAMILY MEMBERSHIP / YEAR 2010

THIS FORM MUST BE FILLED OUT COMPLETELY BY AN ADULT

DATE: _____

Association Fee: \$90.00

The Association fee is due January 1st of each year and expires December 31 of each year.

PARENT/GUARDIAN'S NAME:

Last Name: _____ First Name _____ First Name _____
(Family Name) (Father) (Mother)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

E-MAIL ADDRESS: 1. _____ 2. _____

*Please note: Newsletters & Registration reminders will be e-mailed to the addresses provided above.

PARENT/GUARDIAN WITH DIFFERENT LAST NAME: _____

PHONE: _____

| LIST FULL NAMES OF ALL CHILDREN IN FAMILY | DATE OF BIRTH |
|---|---------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If you would like to make a charitable contribution to the MVAA please enter an amount below.

REMSBERG FIELD CONTRIBUTION \$ _____