



MEMBERSHIP FORM 2011-2012

Please indicate: new member renewing member new contact information

Contact Name: _____ Email: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: (_____) _____

Best way to contact you? (*please select only one*): Email Phone Mail

(*As of 2012, we will be using e-mail as our main form of communication*)

Would you like to be part of our mailing list and receive BAMA updates? Yes No

BAMA values your privacy and will not distribute your information to anyone. You can unsubscribe to our mailing list at any time by emailing contact@bayareamontessoriassociation.org

Current Position: Teacher/Guide Administrator Assistant/Support Staff
 Parent/Friend Other _____

School Affiliation: _____

Membership Fee:

Individual Annual Membership Fee \$35 Additional Donation: _____

School Affiliation Membership School Affiliation Membership (please email contact@bayareamontessoriassociation.org with your school size and we will reply with detailed rates)

*Membership is from July 1 – June 30

*Bay Area Montessori Association is a 501.c.3 non-profit organization

*Membership and donations are tax deductible (Tax ID #20-8701364)

Payment Method:

Please make check or money order payable to *Bay Area Montessori Association*

Mail completed membership form with payment to

BAMA Membership c/o Shirley Gaston

1880 Los Altos Dr.

San Mateo, CA 94402

If you have any additional membership questions, contact JoAnne Bailey at jayjaybailey@yahoo.com or (650) 325-7060.

Check us out online at www.bayareamontessoriassociation.org
or join us on Facebook at BayAreaMontessoriAssociation