

MSC Membership Registration Form
2019-2020 Academic Year

PLEASE PRINT

School Name _____

Address _____

Phone Number _____ FAX Number _____

Year school was established _____

Affiliation (circle one) AMI AMS Commencing membership w/AMI or AMS

Head of School _____

Email _____

Number of Students _____

Program Levels _____

Dues Enclosed _____

By joining MSC -Members agree to abide by **Principles of Good Practice and Common Threads for Montessori Implementation**

Please complete and return this form by September 9, 2019 to:

Mark Meyer, Treasurer, MSC
C/O Hudson Country Montessori School
44A Shelter Rock Rd.
Danbury, CT 06810
Attn: MSC Membership

Enclose the following items*:

- The above registration information
- A copy of your school's current year AMI or AMS membership certificate
- Dues as calculated below (**payable to Montessori Schools of CT**)

MSC Dues Schedule:

\$125: <= 50 students \$250: 51 - 100 students \$375: above 100 students

*Web site post will be completed upon receipt of all criteria