



Annual Membership Form

Revised 11/2017

SCHOOL MEMBERSHIP

To best fulfill our mission, stated above, we need the support of Kentucky Montessori schools, their staff and their parents. Your school membership, from July 1 - June 30 each school year, will provide the following:

- ~ Professional development opportunities
- ~ Job postings on the KMA website (Free)
- ~ A Montessori voice at the state level of government
- ~ A Kentucky Montessori voice at the national level
- ~ Opportunities to build a Montessori collaborative among Montessori schools in Kentucky
- ~ Montessori networking opportunities
- ~ One free Administrator membership (a \$25 value)

Which school membership are you registering?

School, 1-50 students - \$50 School, 51-100 students - \$100 School, 101+ students - \$200

School Name:

Administrator Name:

Address with City and Zip:

School Email:

School Phone:

In order for KMA to best serve you we need particular information about your school. **KMA will not sell or give personal information to any other organization or individual.**

This information is important data KMA will use when speaking to officials about how they can best support authentic Montessori in Kentucky.

How many children in each age bracket do you currently serve?

- | | | |
|---|--|---|
| <input type="checkbox"/> 6 month-11 month | <input type="checkbox"/> 6 year (1 st grade) | <input type="checkbox"/> 12 year (7 th grade) |
| <input type="checkbox"/> 1year | <input type="checkbox"/> 7 year (2 nd grade) | <input type="checkbox"/> 13 year (8 th grade) |
| <input type="checkbox"/> 2year | <input type="checkbox"/> 8 year (3 rd grade) | <input type="checkbox"/> 14 year (9 th grade) |
| <input type="checkbox"/> 3year | <input type="checkbox"/> 9 year (4 th grade) | <input type="checkbox"/> 15 year (10 th grade) |
| <input type="checkbox"/> 4year | <input type="checkbox"/> 10 year (5 th grade) | <input type="checkbox"/> 16 year (11 th grade) |
| <input type="checkbox"/> 5year (K) | <input type="checkbox"/> 11 year (6 th grade) | <input type="checkbox"/> 17 year (12 th grade) |

of Montessori Credential Holding Staff

of assistants

Is your school affiliated or a member of a Montessori organization beside KMA? If so, please list them:



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STAFF MEMBERSHIP - \$25 per individual

(this form is for Administrators who wish to purchase memberships for their staff)

Individual Membership Benefits

- Kentucky Montessori employment opportunities
- Professional development opportunities **with a 10% discount for KMA PD training**
- Guidance for best practices of authentic Montessori through KMA mentoring/coaching programs
- Networking among Kentucky Montessori schools and teachers
- A Montessori voice at the state and national government levels

___ My school will support KMA by sponsoring full staff membership to KMA and will receive a 10% discount.

___ My school's staff will decide individually if they want to support KMA with a membership. (A completed Individual Membership form will be needed.)

Staff Name	E-mail	Montessori Credential (if applicable)
1 _____		
2 _____		
3 _____		
4 _____		
5 _____		
6 _____		
7 _____		
8 _____		
9 _____		
10 _____		

add another page if needed

staff ___ x \$25 = \$ _____

10% discount - \$ _____

Subtotal \$ _____

School Dues + \$ _____

Total Amount \$ _____

If paying by check make payable to
KMA (mail to KMA c/o VMS 480 Pinckard
Pike Versailles, KY 40383)

Check Enclosed: # _____