



RHSEU Booster Membership Form



Student Name _____ **Grad year** _____ **Instrument** _____

Address _____ **City** _____ **Zip** _____

Mother's Name _____ **Home** _____ **Cell** _____

Address (if different from student) _____

Father's Name _____ **Home** _____ **Cell** _____

Address (if different from student) _____

E-Mail Addresses: Mother _____ @ _____ . _____

Father _____ @ _____ . _____

How would you like to receive your statements/correspondence? **Email** or **Mail**

Music Booster Membership

Membership is \$15.00 for one parent

Parent Name: _____

You may add another parent/guardian for an additional \$5.00.

Additional Booster Member Name: _____

****As a member of the Music Boosters you are encouraged to attend the monthly meetings held the last Tuesday of every month to stay informed. For location and times of the monthly meetings check our web site at www.rhseu.com.**

I would like to make an additional tax deductible contribution in the amount of \$_____. A receipt with our non-profit tax ID number will be mailed to you.

Does your company offer matching funds? _____ Does it have a volunteer program for employees? _____