

**MERCY HIGH SCHOOL MOTHERS' CLUB
MEMBERSHIP APPLICATION**

Your Name: _____

Address: _____

City, State, and Zip Code: _____

Home Phone: _____ Cell Phone _____

E-mail _____

(This is the primary method of communication from the Mothers' Club.)

Check one or more of the following:

Student

Year of Graduation

Mother of present MHS student _____

Grandmother of present MHS Student _____

Alumna _____

Other relationship _____

Special interests or abilities you would like to share with us (e.g., leadership, organizational skills, art, communication, baking, decorating, taking notes, etc.)

I would like to consider helping on one of the following committees:

____ Hospitality for Parent Visiting Night

____ Christmas Decorations

____ Hospitality for Monthly Meetings

____ New York Bus Trip

____ Fundraising

____ Mother/Daughter Luncheon

____ Graduation Activities

____ Check here if you are interested in helping to chaperone student dances

For questions/information regarding these committees, please refer to the list of Mothers' Club officers and committee chairpersons in the Mothers' Club section of Mercy's website.

Membership fee is \$10.00 a year. Make check payable to Mercy High School Mothers' Club and return with this form to the receptionist.

Mother's Club Use Only

Amount paid \$ _____

Cash

Check # _____