



APPLICATION & RENEWAL FORM

Return this application form with annual fee of P1,000 cash

MAKATI (North): Maggie Van Wijnen at maggievanwijnen@yahoo.com

ALABANG (South): Sharon Bunn at southmembership@madsmnila.com

Contact Information:

Name of Mother (First)	Name of Mother (SURNAME)
Name of Father (First)	Name of Father (SURNAME)
Mother Nationality	Father Nationality
Address (full address)	Telephone: Cell Phone: Email:

Family Details (only children under 6, please):

Names of Children (First & SURNAME)	Day	Month	Year

- | | |
|------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> New Application | <input type="checkbox"/> Membership Renewal |
| <input type="checkbox"/> Working Mother | <input type="checkbox"/> Information on joining the MADS committee |

Membership fee of P1,000 per annum includes a bi-monthly newsletter. I wish to become a member of MADS and have attached my payment of P1,000 cash .

MADS and its committee will not be held responsible for any loss, damage, personal injury, accident or delay that may occur during MADS events or playgroups.

Signed.....

Date

For Office Use Only	<i>Paid</i>	<i>Receipt No</i>	<i>Pack Sent</i>	<i>Yahoo! Group</i>	<i>Group Coordinator</i>
----------------------------	-------------	-------------------	------------------	---------------------	--------------------------