



MEMBERSHIP FORM 2017-18

MEMBERSHIPS ARE \$10.00 PER YEAR FOR ALL MCPS STAFF MEMBERS

Last Name First Name MI

Email Telephone

Office/School Position

New to MCPS:

I would like to volunteer, please contact me:

Please make all checks payable to "LEAAP" and send via Pony to Helen Blankfeld at 45 West Gude Drive, Suite 4000. For more information, please email [Helen R Blankfeld@mcpsmd.org](mailto:Helen_R_Blankfeld@mcpsmd.org)