

# MID-ATLANTIC CHRISTIAN SCHOOLS ASSOCIATION

## Membership Form 2017-2018



Please complete the following form and return to the MACSA address given below. Be sure to include entire school name and address.

**Your school must agree with MACSA's statement of faith.**

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- \_\_\_\_\_ Check here if this is the first year of membership in MACSA  
\_\_\_\_\_ Check here if your school agrees with the MACSA statement of faith (see [www.macsaonline.org](http://www.macsaonline.org))  
\_\_\_\_\_ Check here if your school would like to contribute to our Scholarship Fund for teachers.  
Please add amount to your check. Thank you.

Name of School \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Head of School \_\_\_\_\_ Title \_\_\_\_\_ Email \_\_\_\_\_

Other Administrator \_\_\_\_\_ Title \_\_\_\_\_ Email \_\_\_\_\_  
(Please include any additional administrators' information on the back side of this form)

Sponsoring Organization \_\_\_\_\_  
(Church, Organization, Parent Association, Board, etc.)

Estimated Enrollment for Sept. \_\_\_\_\_ Years in Existence \_\_\_\_\_ Website \_\_\_\_\_

No. Full-time Teachers \_\_\_\_\_ No. Part-time Teachers \_\_\_\_\_ No. of Board Members \_\_\_\_\_

Board President \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

List Organizational Structure of Grades: (PreK-6; K-9; K-12; etc.) \_\_\_\_\_ A.C.E. \_\_\_\_ Traditional \_\_\_\_

Do You Belong To Another Organization? ACSI \_\_\_\_ Others \_\_\_\_\_

Please include the Names and Emails for the people responsible for the following areas:

Music: \_\_\_\_\_ (Email) \_\_\_\_\_

Art: \_\_\_\_\_ (Email) \_\_\_\_\_

Technology: \_\_\_\_\_ (Email) \_\_\_\_\_

FEE SCHEDULE (YEARLY)	<u>BEFORE SEPTEMBER 30</u>	<u>AFTER SEPTEMBER 30</u>
50 students or less/home school group	\$ 125.00	\$ 175.00
51 to 100 students	200.00	250.00
101 to 200 students	275.00	325.00
201 to 400 students	350.00	400.00
over 400 students	425.00	475.00
Individuals	25.00	25.00
Optional scholarship contribution		

Please make check payable to: **“Mid-Atlantic Christian Schools Association” or “MACSA”**  
Return form and check to: Mrs. Marie Young, Secretary  
MACSA, P. O. Box 2007, Aston, PA 19014-0007  
Phone 610-364-1801 Fax 610-364-1809