

BUSINESS MEMBERSHIP APPLICATION

Business Name: _____

Address: _____

Business Telephone: _____

Contact Person: _____ Title: _____

Email address: _____

Does your business have a website? ___ if yes, please provide the web address:

**Annual Membership Dues are \$40
Please be sure to include a business card!**

Please make your check payable to: PHMS PTSA

Application and Checks should be mailed to:
PTSA c/o Perry Hall Middle School
Attn: Membership Committee
4300 Ebenezer Road
Baltimore, MD 21236