

2021 Annual Individual Membership Application & Profile

The Maryland State Child Care Association offers the opportunity to become an "Individual Member" of the Association! This category is defined in the MSCCA By-Laws as: Individual Members shall be parents and other interested persons concerned with child care, but not employed in a child care center. The individual must want to help further the objectives and purpose of the Association. Individual Members may participate in the bi-annual Election as a candidate for Member at Large, but may not be a candidate for a position as an Officer on the Board of Directors. Individual Membership may not exceed 10% of full membership.

The Annual MSCCA Membership Fee for an Individual Member is \$105.00. This fee entitles the member to attend all annual MSCCA conference functions at the member rate, email communications, mentorship opportunities and networking with colleagues. MSCCA Membership may include legislative/lobbyist representation for individual members and family child care. Membership is renewable on an annual calendar year basis. If you work in a center-based program, you may not join as an individual. The MSCCA is a 501(c)(3) charitable organization – EIN: 52-1398476

NAME:								
ADDRESS:								
Street		Cit	y			State	Zip	
Telephone:		Email: (Required)						
Individual Member associa	tion with child care: _							
MSCCA must require a payr Legislative Session (Annua							s for th	e 2021
Individual MSCCA Dues =							\$	105.00
If you are a <u>Published</u> participating pr	ogram in Maryland EXCELS at	the time o	f applica	ition, pleas	e deduct 10	% off MSCCA membership	dues <u>! \$_</u>	
Payment to Government Relations - Advocacy for Members fund					(Required) <u>\$</u>	25.00	
National Child Care Association Annual Dues					(Required	d) <u>\$</u>	2.50	
Donation to MSCCA Passio	n for Excellence Grant	/Schola	rship ((MSCCA	membe	rs only are eligible t	to recei	ve grant)
(Optional)		\$\$	10	_ \$20	\$30	Other	\$	
Method of Payment:Che	eck enclosed/Check#	or _	VI:	SA	_ MC	TOTAL Amex	<u>\$</u>	
Credit Card #:			Exp.d	_/ ate (MO/	<u>(YR)</u>	CVV code (required	<u> </u>	
			_/					
PRINT name of individual/con	npany, as it appears on	the card	ı. (Si	ignature))			(Date)

Billing address of card (Street and Zip Code ONLY-(Required)

Requirements to process membership include (1) the completed application, (2) full payment and (3) a copy of your MSDE Child Care License.

Please mail all 3 components to:

- Charles Wainwright, MSCCA Membership Chair.
 1631 Edgewood Place #101, Hagerstown, MD. 21740 or
- Or Email all requirements to childrensenrichment@msn.com or apply on website at www.mscca.org Questions? Contact Christina Peusch, Executive Director; Phone: 410-820-9196.

 Retain a copy for your record.