



KIHS Athletic Boosters

Supporting More Than 500 Student Athletes on 42 Teams

Membership Application

Parent / Guardian Contact Information Name(s): _____
Street Address: _____ City: _____ Zip: _____
Home Phone: _____ E-mail Address: _____
Cell/Work: _____

Student Athlete Information

1) Name: _____
Sex: M F
Grade: _____
Sport(s): _____
2) Name: _____
Sex: M F
Grade: _____
Sport(s): _____
3) Name: _____
Sex: M F
Grade: _____
Sport(s): _____

Membership Enrollment

Membership period – One calendar year from this date: _____
(Includes \$1 discount on Admission for up to 4 persons at home events excluding Playoffs, Tournaments, and State Sponsored Games/Meets)

- BUCCANEER Membership \$150.00
- BLUE Membership \$100.00
- SILVER Membership \$50.00
- WHITE Membership \$25.00
- ALUMNI Membership \$10.00

Volunteers Make It All Happen! Please tell us how you would like to help.

Concessions ___ Fields & Facilities ___ Fund Raising ___ Marketing ___ Membership ___
Recognition Wear ___ Team Liaison ___

Please make your check payable to: KIHS Athletic Boosters

Please deliver or mail this form and check to:

KIHS

900 Love Point Road, Stevensville, MD 21666

Revised- 1/22/2019