2023-2024 **MMTA Junior Membership Application**

Junior Membership: October 1 – September 30.



Name (Title, First Name, Middle Init., Last Name) Street Address			Date of Birth	
			Phone	
City	State	Zip Code	Email	
Teaching Field(s)			Gender: Male Female —	
Name/Location of current school			<u> </u>	
Teacher: Please compl	ete, sign and d	ate:		
Teacher's Name (Title, First Name, Middle Init., Last Name)			Phone	
Street Address			Email Is teacher member of MMTA? Yes No	
City	State	Zip Code	Number of years studied with present teacher? ————	
I hereby certify		is curi	rently my student, and will be studying with me throughout	
the upcoming year.				
Teacher's Signature:			Date:	

Membership Fee: \$10.00

Payment: Mail signed application and check (payable to MMTA) to: MMTA • 10800 Lyndale Ave S, Ste. 120 • Bloomington, MN 55420

Note:

- * Junior Members and their students may participate in all MMTA programs. The MMTA Mentor Teacher must sign all registrations before they are submitted by the Junior Member.
- * Junior Members are *not* members of *MTNA*, nor are their students eligible for participation in MTNA programs.