



THOMAS JEFFERSON RPM STAFF REGISTRATION FORM: 2020-21

- (1) email a clear image to membership@tjrpm.org
- (2) mail to "TJ RPM, PO Box 3071, Federal Way WA, 98063-3071."

LAST Name: _____ **FIRST Name:** _____

Full Address: _____

*Phone: _____ *E-mail: _____

*Cell Phone: _____

**Information will only be used by TJRPM and you can opt out at any time.*

Type of Membership: **\$5 Staff** **Optional Donation: \$** _____

Cash/Check/Credit/Paypal Amount: \$ _____ (Checks payable to "Thomas Jefferson RPM", Paypal option on website)

Visa/MC/Discover #: _____ **CID:** _____ **Expiration Date:** _____

Name on Card: _____ **Signature:** _____

Staff Memberships contribute much to RPM's ability to support TJHS: your dollars, memberships, and general sense of 'buy-in' help us build a stronger organization. We try hard to create value for those we serve, and your help matters. Thank you for being part of our mission!