



UNIVERSITY of MARYLAND  
EASTERN SHORE

OFFICE OF THE VICE PRESIDENT FOR STUDENT AFFAIRS AND ENROLLMENT MANAGEMENT

**UMES PARENTS' ASSOCIATION REGISTRATION FORM**

**(Please print all information clearly)**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**PHONE** \_\_\_\_\_ - \_\_\_\_\_ **OR** \_\_\_\_\_ - \_\_\_\_\_  
(A/C) (A/C)

**E-MAIL ADDRESS** \_\_\_\_\_

**STUDENT'S NAME:** \_\_\_\_\_

**STUDENT'S ID#:** \_\_\_\_\_ **Major:** \_\_\_\_\_

**STUDENT'S ANTICIPATED YEAR OF COLLEGE GRADUATION** \_\_\_\_\_

**Be sure to check the year in which your membership fee is to be applied.**

**Payment for Program Year:** \_\_\_\_\_ **August 2013 – May 2014**  
\_\_\_\_\_ **August 2014 – May 2015**

**Please enclose a check or money order for the \$50.00 membership fee, payable to the UMES Parents' Association!**

**Tee-Shirt Size(s):** \_\_\_\_\_ **Specify**  
\_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ 2 X-Lg \_\_\_\_\_ 3 X-Lg **Other:** \_\_\_\_\_