



NEW MANCHESTER TOUCHDOWN CLUB  
MEMBERSHIP APPLICATION

Name(s) \_\_\_\_\_

Relation to Student \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Student Name(s)	JV	VARSITY	Freshmen	Player #	Grade
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**The New Manchester Touchdown Club was formed exclusively to Promote Parent & Student involvement. Share important information in regards to deadlines, schedules, forms, events, and fundraising, sponsorships and donations requests and the encouragement of attendance at all football related functions and its athletes.**

**Meetings are held:** Monthly TBD. The location TBD.

The dues for the 2016-2017 membership are \$35.00 per year per family.

**Cash and Checks are accepted. Please make checks payable to New Manchester Touchdown Club. Attn Membership**

Pymt\$ \_\_\_\_\_

Ck# \_\_\_\_\_

Date Signed Up \_\_\_\_\_

