



Washington Learning Source Membership Form
 (For use by Washington State educational entities other than school districts)

NAME OF EDUCATIONAL INSTITUTION The Meridian School	ORGANIZATION TYPE: <input checked="" type="checkbox"/> PRIVATE SCHOOL <input type="checkbox"/> STATE DEPT. OF EDUCATION <input type="checkbox"/> HIGHER EDUCATION INSTITUTION <input checked="" type="checkbox"/> NONPROFIT EDUCATIONAL ORGANIZATION
CONTACT PERSON Nick DeVogel	CONTACT EMAIL ndevogel@meridianschool.edu
CONTACT PHONE 206.632.7154	CONTACT FAX 206.633.1864
MAILING ADDRESS LINE 1 4649 Sunnyside Ave N #242	CITY STATE ZIP Seattle, WA 98103-6955
LOGIN: (FOR WLS PURPOSES ONLY) WLSMeridian	PASSWORD (FOR WLS PURPOSES ONLY) GoMonArchs

On behalf of the agency specified herein, I, Superintendent and/or Chief Executive Officer of said agency, have reviewed and accepted:



 Signature

6.16.2015

 Date Signed

Jack Shea

 Printed Name

The Meridian School

 Agency Name

Head of School

 Printed Title

MAIL OR FAX YOUR COMPLETED FORM TO:
 Anne Anderson, Director
 Washington Learning Source
 Puget Sound ESD
 800 Oakesdale Ave SW
 Renton, WA 98057
 (425) 917-7907 Fax