

Advocacy Assistance

Acknowledgement APPLICATION FOR MEMBERSHIP

January 1, 2018 through December 31, 2018

Individual membership dues are \$15 per year; \$25 per year for non-profit organizations and for profit entities. Government agencies are exempt from paying dues. Individual employees are encouraged to register as individual; however, this will not offeet veting privileges.

however, this will not affect voting privileges.			
Form of Membership: Individual \square Non-Prof	ìt □	For-Profit □	Government Agency \square
Organization or Individual Name:			
Nature of Business or Profession:			
Business Address:			
Business Phone:	_ Fax:		
Contact Person:			
Job Title:			
Preferred Contact Person:			
Preferred E-Mail Address: Additional personnel email addresses (to add to email)	ail list):		
Please complete and return with your annual dues to:	CO	ALITION USE ONLY	Y
HOT Homeless Coalition C/O:	Dat	Date Received: Name: Check #:	
Shaun Lee	Nar		
P.O. Box 23025 Waco, Texas 76702	Che		
If you have any questions, please contact: Carlton Willis at:			
shaun.lee@hotrmhmr.org or Melinda Bonds at:	Cas	sh Received:	
melinda.bonds@hotrmhmr.org.			
If requested, a receipt will be sent to you for your records.			