

# COALITION FOR HUMAN SERVICES

## MEMBERSHIP APPLICATION/RENEWAL FY17

JULY 1, 2016 – JUNE 30, 2017

Type of Membership (check one):

\_\_\_\_\_ Organizational @ \$35: This membership provides the member organization with three designated members as voting members for the annual meeting.

\_\_\_\_\_ Individual @ \$15: This membership category is for private citizens who are not staff of a public or private human service agency. They are entitled to one vote at the annual meeting.

Name (Principal Contact Person For Agencies): \_\_\_\_\_ Agency

(Organizational Membership): \_\_\_\_\_ Address:

\_\_\_\_\_

\_\_\_\_\_

Contact Info: (NOTE: Please notify Coalition Treasurer of changes occurring during the year)

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

What topics would you like to see at our training events or your areas of interest:

\_\_\_\_\_

Please mail this form and your check, payable to Coalition For Human Services, to:

Mary Foley, Treasurer  
Coalition For Human Services c/o Volunteer Prince William  
9248 Center Street, Manassas, VA 20110