

Membership Form



I am a:

- New Member Renewing Member

List me as a/an:

- Individual Representative of an Organization Elected Official

Check the ONE category that best describes the area you represent:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Youth | <input type="checkbox"/> Parents | <input type="checkbox"/> Business | <input type="checkbox"/> Media |
| <input type="checkbox"/> Schools | <input type="checkbox"/> Healthcare Professional | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Civic/Volunteer Organization |
| <input type="checkbox"/> Religious/Fraternal Organization | <input type="checkbox"/> Youth Serving Organization | <input type="checkbox"/> State/Local/Tribal Government | <input type="checkbox"/> Substance Abuse Organization |

I would like to participate in the following workgroup/s:

- Community-Level Policy Change Business/Organizational Policy Change Parent/Resident Social Norms Youth Social Norms E-mail List Subscriber Only

Contact Information

Name: _____ Title: _____

Organization: _____

Home or Business Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ T-Shirt Size: _____

- Add my name to the public list of members

- | | | | |
|-------------------------|-------------------------------------|------------------------------------|----------------------------------|
| Best way to reach you: | <input type="checkbox"/> Phone Call | <input type="checkbox"/> Text | <input type="checkbox"/> E-mail |
| Best time to reach you: | <input type="checkbox"/> Morning | <input type="checkbox"/> Afternoon | <input type="checkbox"/> Evening |

What other organizations in Ashland or Cherryland are you involved with? (Example: PTA, REACH, etc.)

What skills/talents can you bring to our coalition's work?

I consent to Ashland Cherryland Together using my name for confidential grant-reporting purposes and I authorize the use of my contact information, including e-mail address, to send me information related to coalition activities.

Signature

Date