



F.A. C.C.

Florence Area Community Coalition

P.O. Box 1161, Florence Oregon 97439

www.florenceareacc.org

2018-2019 MEMBERSHIP APPLICATION

FACC Mission Statement: To improve the quality of life in Western Lane County through partnerships, networking, volunteerism, community involvement, education and awareness.

Name of Individual/Organization/Business: _____

Contact Person (if business or org.): _____

Address: _____

Phone: _____ FAX _____

Email: _____

Website (if applicable): _____

Hours of operation: _____

Brief description of your services:

Membership Category (check one): ___ Org/Business (\$50) ___ Individual (\$25)

- clubs/associations
- government agencies
- veteran's groups
- hospitals
- individual
- non-profit/not-for profit
- faith based organization
- law enforcement/first responder agencies
- physical and mental health care providers
- businesses and business groups
- lodges/fraternal organizations
- senior citizen and youth organizations

I would like to be listed on the FACC website: Yes No

Please return completed application with your check to:

FACC, Attention Treasurer, PO Box 1161, Florence, OR 97439

Membership July 1 – June 30. Applications received after April 1st include membership through the following year

OFFICE USE ONLY: Date: _____ Amount: _____ Ck. Number: _____