



# CCEH MEMBERSHIP FORM

*Program Members 2023*

Coalition membership is open to individuals, organizations, corporations, and government agencies. Program members are considered as any entity where: the primary mission is to prevent and end homelessness; services or advocacy are provided; or an impact on people experiencing homelessness is made on a regular basis.

## Membership Status

New Membership

Membership Renewal

Date: \_\_\_\_\_

## Member Information

Organization Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Website: \_\_\_\_\_

CEO /  ED /  President:

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip code: \_\_\_\_\_

## Primary Contact Information

**Each Program Member is entitled to one vote in any matter in which members are entitled to vote**

Use CEO / Executive Director / President

*Please name a primary contact who will also serve as the voting member (if different from CEO/ED/President).*

**VOTE**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

**Does your organization have additional contacts who should receive important updates?**

*Please fill out the appropriate contact for each category applicable to your organization.*



### Advocacy Contact

Name: \_\_\_\_\_

Email: \_\_\_\_\_



### Supportive Housing Contact

Name: \_\_\_\_\_

Email: \_\_\_\_\_



### Outreach Program Contact

Name: \_\_\_\_\_

Email: \_\_\_\_\_



### Shelter Manager Contact

Name: \_\_\_\_\_

Email: \_\_\_\_\_



### Youth Provider Contact

Name: \_\_\_\_\_

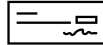
Email: \_\_\_\_\_

# CCEH PAYMENT FORM

*Program Members 2023*



## Payment Methods



Please return the membership form and the payment form with a check or a money order payable to:

**Connecticut Coalition to End Homelessness, 257 Lawrence Street, Hartford, CT 06106**



You may also complete membership and payment online at <https://cceh.org/about/members/>

## Membership Levels

- \$1,000** – My organization has \$5M+ in annual revenue.
- \$500** – My organization has between \$1M and \$5M in annual revenue.
- \$250** – My organization has less than \$1M in annual revenue.