



## 2017 Midlands Area Consortium for the Homeless Membership Form

Name	<input type="text"/>				
Organization	<input type="text"/>				
Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>
Phone	<input type="text"/>				
Email	<input type="text"/>				

### Please choose your membership level:

- |  |       |
|--|-------|
| <input type="checkbox"/> Currently/Formerly Homeless | \$0   |
| <input type="checkbox"/> Individual                  | \$25  |
| <input type="checkbox"/> Organizational*             | \$100 |

Total Amount \$

\*For organizational membership, please provide information on the second representative

Name:	<input type="text"/>
Email:	<input type="text"/>
Phone:	<input type="text"/>

### Benefits of Membership

By joining the Midlands Area Consortium for the Homeless (MACH), you will be part of the important work in ending homelessness, be connected with many other groups, and receive:

- Timely e-mail updates on policy and funding opportunities
- Free participation in clinics/workshops/webinars
- HMIS support and report writing
- Voting rights at stakeholder and annual meetings
- Networking opportunities
- Free table at MACH sponsored breakfast
- Organization promoted on MACH website and social media to include events

As a member of MACH, I would like to participate in on the following committees:

- ☐ Advocacy ☐ Membership and Training ☐ Data and Evaluation ☐ Youth In Transition ☐ Affordable Housing

### Expectations of Members

Actively engage in planning; regularly attend meetings; support public awareness; be an advocate; participate in coalition committees and workgroups

Please make checks payable to **Midlands Area Consortium for the Homeless** and mail along with this form to:

MACH  
c/o Andy Pope  
1818 Blanding St.  
Columbia, SC 29201