



**Community Health Action Coalition**  
Membership Application

Everyone is welcome at the CHAC table regardless of membership status. However, please show your support of CHAC by becoming a paying member. The membership fee demonstrates that you value this convening organization. Our hope is to have 100% of our participants contribute through a membership fee and/or a donation. Select a membership below and please consider offering an additional donation. **Membership fees and donations both ARE tax deductible, annual, and due January 1st.**

Please check desired Membership level:

- \_\_\_\_\_ Individual: \$25
- \_\_\_\_\_ Organization/Business: Suggested minimum \$75
- \_\_\_\_\_ Student member (under 21 or with current student ID): Free

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

Title: \_\_\_\_\_

Organizational affiliation: \_\_\_\_\_

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

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

Telephone number: \_\_\_\_\_

Donations (separate from membership): \$ \_\_\_\_\_

A scholarship may be available upon application to and approval of the CHAC Board of Directors.

*Thank you for your support! Please make check payable to the Community Foundation with a notation that it's for CHAC and send completed form with payment to:*

Community Foundation  
C/O Community Health Action Coalition  
PO Box 1673  
Durango, CO 81302

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