MEMBERSHIP OR RENEWAL APPLICATION

Membership Requirement: Be willing to participate in our mission of eliminating or reducing homelessness in the Mississippi Gulf Coast.

Membership Types:

- **Non-profit Organizational Member**: Representative of a non-profit organization.
- **Individual Member**: Any person representing themselves.
- **Non-provider Corporations**: Members representing a particular business or corporation.
- **Government Entity**: Members representing a local, state, or federal government entity.

Yes, I would like to join the Open Doors Homeless Coalition as an (Check one)

- [ ] Organization Member
- [ ] Individual Member
- [ ] Non-provider Corporations
- [ ] Government Entity

Yes, I would consider joining a committee __

Name: First: ____________________________ MI __ Last: ____________________________

Street Address: ____________________________

City: ____________________________ County: __________ State: _______ Zip: ___________

Email: ____________________________ @______________________________

Telephone Number: ____________________________ Mobile Telephone Number: ____________________________

Signed: ____________________________ Date: ____________________________

Dues Structure (Annual) Circle the appropriate dues amount for your membership category. Agencies that are not service providers but would like to be members of the Coalition pay $100 in dues annually.

**Individual**: $25

<table>
<thead>
<tr>
<th>Operating Budget</th>
<th>Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 150 K</td>
<td>$50</td>
</tr>
<tr>
<td>150 K to 300 K</td>
<td>$100</td>
</tr>
<tr>
<td>300 K to 500 K</td>
<td>$150</td>
</tr>
<tr>
<td>Over 500 K</td>
<td>$200</td>
</tr>
</tbody>
</table>

**Government Entity**: $100

Please fill out this application and send to the address shown at the top of the page: Attn: ODHC Patti Guider or email: pattiguider@opendoorshc.org

“one voice for the many faces of the homeless”