

*Community Resource Connections, Inc.*

CRC ONLY Membership Application Form

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

Executive Director \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_ County \_\_\_\_\_

Telephone \_\_\_\_\_ FAX \_\_\_\_\_ E-mail \_\_\_\_\_

Web site \_\_\_\_\_

Federal ID# \_\_\_\_\_ Year Organized \_\_\_\_\_ Number of Employees \_\_\_\_\_ FTE \_\_\_\_\_ PT \_\_\_\_\_

- *Please attach your organization's mission statement and program description.*
- *If you would like your Board of Directors or your staff to receive pertinent notices directly from CRC please include their names and e-mail addresses.*

Refer to the following schedule to determine your annual dues. Memberships run for 12 months from when your organization's dues are first received.

If your current annual operating budget is:	Your CRC only membership dues are:
\$0-\$99,999.....	\$50
\$100,00-\$199,999.....	\$50
\$200,000-\$399,999.....	\$100
\$400,000-\$699,999.....	\$200
\$700,000-\$999,999.....	\$300
\$1,000,000- \$1,999,999.....	\$400
\$2,000,000—\$2,999,999 .....	\$500
\$3,000,000—\$ 4,999,999.....	\$600
\$5,000,000—\$9,999,999.....	\$700
\$10,000,000 and above.....	\$800

*Dues Enclosed \$ \_\_\_\_\_*

*Checks payable to: CRC*

*Send your application and dues to:*

*Attn: Ruth Sherman*

*Community Resource Connections, Inc.*

*616 America Avenue NW Suite 170*

*Bemidji, MN 56601*