



# HERITAGE CHRISTIAN PROFESSIONALS

## MEMBER APPLICATION

**DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**RESIDENCE:**

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**EMPLOYER:**

Company \_\_\_\_\_

Title/Position \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Type of business or organization \_\_\_\_\_

Primary service (s) and area/population served \_\_\_\_\_

Please list boards and committees that you serve on, or have served on (business, civic, community, fraternal, political, professional, recreational, religious, social).

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Please let us know where you received your education/training/certificates**

\_\_\_\_\_

\_\_\_\_\_

**How do you feel HCP would benefit from your involvement with the group?**

\_\_\_\_\_

\_\_\_\_\_

Continued...

**Skills, experience and interest (Please circle all that apply)**

Finance, accounting  
Personnel, human resources  
Administration, management  
Nonprofit experience  
Community service  
Public relations, communications  
Photography

Education instruction  
Special events  
Grant writing  
Fundraising  
Outreach, advocacy  
Other \_\_\_\_\_  
Other \_\_\_\_\_

**Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of HYP**

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**Please tell us anything else you'd like to share**

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Model Release: I understand when attending Heritage Christian Services (and Heritage Christian Professionals) events, photography and video recording may occur. By entering the event premises, you consent to photography and video recording and its/their release, publication or reproduction to be used for news, promotional purposes, advertising, inclusion on websites, or any other purpose by Heritage Christian Services (HCS). You release HCS, its affiliates, officers, employees, and each and all persons involved from any liability connected with the taking, recording, digitizing, or publication of photographs, computer images, and/or video.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Thank you very much for your interest. You will hear from us soon!**

Please send your completed form to Alyssa Priddy, Volunteer Coordinator, at:

Email: alyssa.priddy@heritagechristianservices.org  
Fax: (585) 340-2076  
Mail: Heritage Christian Services  
Attn: Alyssa Priddy  
275 Kenneth Dr., Suite 100  
Rochester, NY 14623