

MEMBER APPLICATION

Date:			
Name:			
Residence: Address Phone			
E-mail			
Employer: Company			
Title/Position Address			
	s or organization:	il	
	ls and committees that you serve on, Il, professional, recreational, religious	or have served on (business, civic, cor s, social).	mmunity,
Organization	Role/Title	Dates of Service	
Please let us kr	now where you received your educ	ation/training/certificates	
How do you fee	el HCYP would benefit from your in	volvement with the group?	

Continued...

Skills, experience and interests (Please cir	cle all that apply)
Finance, accounting	Education, instruction
Personnel, human resources	Special events
Administration, management	Grant writing
Nonprofit experience	Fundraising
Community service	Outreach, advocacy
Public relations, communications	Other
Photography	Other
Please list any groups, organizations or busin	esses that you could serve as a liaison to on behalf of HCYP.
Please tell us anything else you'd like to share	э.
Professional) events, photography and video consent to photography and video recording a news, promotional purposes, advertising, incl Services (HCS). You release HCS, its affiliate	Heritage Christian Services (and Heritage Christian Young recording may occur. By entering the event premises, you and its/their release, publication or reproduction to be used for usion on websites, or any other purpose by Heritage Christian es, officers, employees, and each and all persons involved ecording, digitizing, or publication of photographs, computer
Signature:	Date:
Thank you very much for your interest. Yo	u'll hear from us soon!
Please send your completed form to Jillian Ca Email: heather.geoca@heritagechrichen Mail: Heritage Christian Services	•

Heritage Christian Professionals www.heritagechristianservices.org/volunteer/professionals

Attn: Heather Geoca

Rochester, NY 14623

275 Kenneth Drive, Suite 100