

2021 MEMBERSHIP FORM (Purchase Order) COMMUNITY ACTION PARTNERSHIP

RENEW MY MEMBERSHIP

NEW MEMBERSHIP

Please complete this form in its entirety and return to Community Action Partnership. The information provided will be published in the CAA Directory!

Agency _____ CSBG Funds \$ _____ Agency Budget\$ _____

Check all that apply: Public Private Rural Urban # Employees _____

Executive Director/CEO _____ Director's Email _____

Board Chair _____ Email: _____

Mailing Address for CAA Directory _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Alternate Email _____

Web Address (URL) _____

Counties Served _____

Check Program Services Provided: Child Development Head Start Health Food & Nutrition
 Housing & Homeless VITA Financial Literacy Workforce Development Weatherization
 LIHEAP Supportive Services for Veterans (SSVF) Other

PAYMENT

Credit Card - If paying with credit card, please contact our Membership Team (Jovita Tolbert and Madison Wicks) at membership@communityactionpartnership.com or our Fiscal Team at fiscal@communityactionpartnership.com.

Check \$ _____ (payable to Community Action Partnership) EIN# _____

Please return completed form and return it with your payment to: **Community Action Partnership, 1020 19th Street, NW, Suite 700, Washington, DC 20036.**



*Membership year is
January 1 — December 31.
Please check the appropriate
CSBG Funding Level.*

CSBG Funding Level	1-Year Membership	2-Year Membership
\$100,000 or less	<input type="checkbox"/> \$430	<input type="checkbox"/> \$775
\$100,000 - \$249,999	<input type="checkbox"/> \$830	<input type="checkbox"/> \$1495
\$250,000 - \$499,999	<input type="checkbox"/> \$1130	<input type="checkbox"/> \$ 2035
\$500,000 - \$749,999	<input type="checkbox"/> \$1,430	<input type="checkbox"/> \$2575
\$750,000 - \$999,999	<input type="checkbox"/> \$2,060	<input type="checkbox"/> \$3710
\$1,000,000 - \$2,499,999	<input type="checkbox"/> \$2,595	<input type="checkbox"/> \$4670
\$2,500,000 - \$ 4,999,999	<input type="checkbox"/> \$3,725	<input type="checkbox"/> \$6705
\$5,000,000 and over	<input type="checkbox"/> \$4,790	<input type="checkbox"/> \$8620
State or Regional Association, CSBG Office, Affiliate	<input type="checkbox"/> \$500	<input type="checkbox"/> \$900

Community Action Partnership 1020 19th Street, NW, Suite 700 Washington, DC 20036 (202) 265-7546

www.communityactionpartnership.com

Membership contact: membership@communityactionpartnership.com

This form may be photocopied and scanned

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