

Membership form

For new members and current member renewal

Membership in the Active Living Coalition is open to any individual or organization who endorses the coalition's mission and wishes to serve as a volunteer to our cause.

Membership in the Active Living Coalition is free of charge and members do not receive compensation for service.

Mission: The Active Living Coalition exists to promote and create active healthy living opportunities for all people in Del Norte County

Name: _____ **Credentials:** _____

Organization (if applicable): _____

Membership Status: Are you New Member or Renewing Your Membership?

New Member (as of: _____) Renewing Member

Address: _____

City: _____ **County:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Do we have permission to list your organization as an Active Living Coalition member in coalition-related materials, advertisements, website, and/or social media posts, as appropriate? Yes No

Priority Areas: To most efficiently complete work, the coalition breaks down its work into the following priority areas:

1. Promotion of Active Living opportunities in Del Norte County
2. Community Design that promotes active living
3. Active living education and events

Which priority areas do you have expertise in and/or would be most interested in working with? You will be invited to participate in priority activities based on your selections below.

Promotion Committee Community design Education and events Committee

What skills or experience do you currently possess, that you can contribute to the coalition's efforts?

- | | | |
|---|---|--|
| <input type="checkbox"/> Data Collection | <input type="checkbox"/> Event Planning | <input type="checkbox"/> Evaluation Analysis |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Grassroots Organizing | <input type="checkbox"/> Media Writing/Outreach |
| <input type="checkbox"/> Meeting Facilitation | <input type="checkbox"/> Presentations (Preparing/Giving) | <input type="checkbox"/> Priority Population Outreach |
| <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Social Media Engagement | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Training Others | <input type="checkbox"/> Website Maintenance | <input type="checkbox"/> Writing and Editing Materials |

Other _____ Other _____

What active living issues would you like to learn more about and/or skills do you wish to develop in the next year, which the coalition could potentially provide through resources and training?

As a member of the Active Living Coalition I endorse the mission of the coalition and pledge my participation.

Signature: _____ **Date:** _____