

2017-2018 Nashville-Davidson County Continuum of Care (CoC) MEMBERSHIP APPLICATION

For Fiscal Year July 1, 2017 - June 30, 2018

APPLICATION DATE, TYPE, & CATEGORY

APPLICATION DATE:

TYPE OF APPLICATION:

REGISTRATION TYPE:

☐ New Application

☐ Organization ☐ Individual

☐ Update ☐ Renewal

ORGANIZATION INFORMATION

Organization/Individual Name:

Address:

(Please note if you are homeless or have lived experience)

Website (if applicable):

How would you/the organization like to be listed in any CoC-related publications?

NAMES & E-MAIL ADDRESSES OF ORGANIZATIONAL REPRESENTATIVES

Primary Contact: E-mail:

Phone Number for Primary Contact Only: () [] Office [] Mobile [] Other

ADDITIONAL MEMBERS WHO WILL PARTICIPATE FROM THIS ORGANIZATION:

Name of authorized proxy: E-mail:

Name: E-mail:

Name: E-mail:

Name: E-mail:

COMMITTEE(S) OF INTEREST

(Each member organization are encouraged to have representation on at least one committee.)

☐ Data Committee

☐ Performance Evaluation Committee

☐ By-laws

☐ Coordinated Entry (CES)

☐ Membership Committee

☐ Veterans Work Group

This membership will expire on June 30, 2018, and must be renewed on or before July 1, 2018.

Please email or mail to:

Suzie Tolmie, Homeless Coordinator

stolmie@nashville-mdha.org

MDHA

712 South Sixth Street

Nashville, TN 37206

**If you would like additional information about Nashville's Continuum of Care ("CoC"),
please visit our website at:**

<http://www.nashville-mdha.org/community-development/about-the-continuum-of-care/>