

Thurston Early Childhood Coalition
MEMBERSHIP FORM



Make \$24 Check Payable to:
WELF/Thrive Washington

Questions Call - (360) 970-7652

Send Check to WELF/Thrive WA and Form to:

Sandy Nelson, ESD 113
6005 Tyee Drive SW
Tumwater, WA 98512

To Pay by Credit Card the Membership Fee is \$25: Contact Sandy Nelson, ESD 113. Have the following information ready: Card Type, Name on Card, Card Billing Address, Card Number, Security Code and Expiration Date

Name (Print) _____

Address _____ **City** _____ **Zip** _____

Telephone _____ **E-Mail** _____

Agency/Organization Affiliation _____

In applying for membership as a “partner”, I agree to pay annual dues of \$24. I am the designated voting representative of above agency/organization. (Membership is from July 1 through June 30 of the following year.)

I am a “non-voting representative” of the above agency/organization. (Our voting member has already paid the dues for our “partner” member agency/organization.)

I am applying for membership as an “informed member”. I will not be paying dues and will not have a vote.

I agree to support the mission, guiding principles and strategic goals of TECC.

Signature _____ *Date* _____