



Marion County Continuity of Care (MC4)  
NEW OR RENEWAL  
Membership Form

Membership Information (PLEASE PRINT):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business or Employer: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date: \_\_\_\_\_

Level of Membership:

PLEASE CHECK ONE

Non-Profit - \$50

Individual - \$100

Business - \$150

Are you interested in serving on a committee? If so, please circle your choice:

- Communication Committee:

Collaboratively manages and updates Facebook and other communication channels to effectively engage with our membership. This committee focuses on enhancing our marketing strategies to ensure effective communication within our community.

- Membership Committee:

Works collectively to maintain records of visitors, new and existing members. Volunteers in welcoming members and guests during general membership meetings and takes responsibility for follow-up communications.

- Fundraising Committee:

Engages in collective efforts to devise and execute fundraising initiatives. These initiatives are aimed at securing funds for MC4's community outreach endeavors, enabling us to better serve our community's needs.

Kindly fill out the form and bring it to the sign-in table at the General Membership monthly meeting to join as a valued member of MC4. Check your email for the billing invoice regarding your dues.

Engage with us on our committees and help us make a significant impact in our community. Thank you for your interest and ongoing support!