Interagency Council of Norristown
Membership Form
September 2023 – August 2024

Please check one type of membership:

- $105 Non-profit organization with a budget under $1 million
- $165 Non-profit organization with a budget $1 million and over
- $165 Government/public (state, county, local) department
- $165 Public School District
- $165 Private for-profit enterprise
- $65 Individual (not serving as organization representative)

AGENCY INFORMATION (Please print or type all information):

Agency Name: ____________________________________________________________

Address: ________________________________________________________________
Street
__________________________
Town State Zip code

Phone number: __________________ Fax number: ______________________________

Agency email: __________________ Web site: ________________________________

CONTACT INFORMATION:
Key Contact: __________________ How many direct service staff does your agency have?____________

The Key contact person is the main agency contact person for ICN who is responsible for distributing ICN information to the other agency members for all planned events or meetings.

Key contact email ______________________________ 2nd email ______________________________

Person filling out this form: ___________________________ Phone: _______________________

If needed, this form may be duplicated and submitted as an invoice to your agency for payment. Please return this application and payment before September 1, 2023, to ICN, P.O. Box 697, Norristown, PA 19404. Thank you.

Since all members are included in the ICN Connections Guide, new members are asked to complete the Description of Services section below. Existing members are asked to provide any updates.

Please provide a short one paragraph description of services:

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The Interagency Council of Norristown reserves the right to edit all information to comply with the format of the guidebook. Submission of this form does not guarantee inclusion in ICN’s resource guidebook.