

Centre County
Partnership for Community Health
P.O. 563
Lemont, PA 16851



Susan Foster, Chair
Rebecca Ardoline, Vice Chair
Brenda Kim, Treasurer
Kristen Houser, Secretary

"Partnering to Bridge the Gaps"

Membership Application

The mission of the Centre County Partnership for Community Health is to support an inclusive, caring community that promotes healthy people and enhances quality of life through collaborative relationships.

Name: _____
(Please Print)

Address: _____

Telephone Number: _____

E-mail: _____

Organization Affiliation (if applicable):

Name of Organization: _____

Address: _____

Telephone: _____

Please mail this application form to:
Centre County Partnership for Community Health, P.O. Box 563, Lemont, PA 16851

Yearly membership dues:

- Organization - \$30
- Individual - \$15

Please check your areas of interest:

- Children's Health
- Health Education
- Mental Health
- Health Needs of the Aging/Geriatric Care
- Health Screening/Injury and Illness Prevention
- Primary Health Care
- Dental Care
- Vision Care
- Other: _____

Please check your areas of skill/expertise:

- Fundraising/ Grant Writing
- Membership/ Recruitment
- Media/Communications/Publicity/ Web Design
- Data Analysis/ Information
- Access to Health Care/ Insurance
- Education
- Other: _____