



# MEMBERSHIP UPDATE & AGREEMENT



## Faith Center Information

Faith Center Name \_\_\_\_\_

Website (Optional) \_\_\_\_\_ Faith Tradition \_\_\_\_\_

## Organization Information

Faith Leader \_\_\_\_\_ Title \_\_\_\_\_

## Referral Information

1. Primary Contact \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

2. Secondary Contact (Optional) \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

## Agreement and Signature

**Our Faith Community agrees to support Interfaith Community Services in the following way(s):**

*Check all that apply*

**Monetary Donations**

**In-kind Donations**

**Volunteer Support**

**Agreement for Interfaith to Refer Clients to Your Resources and Congregations**

Please check the box and sign below if you agree for Interfaith Community Services to link and refer clients to your community-based organizations including faith-based congregations, cultural organizations, and peer-directed programs. This also acknowledges that clergy and lay representatives may refer community members to the services and programs provided by Interfaith Community Services.

Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

*Members and their representatives may, upon request, receive a copy of the Interfaith Community Services Bylaws or may review the Bylaws at Interfaith's headquarters at 550 W. Washington Ave., Escondido, CA 92025.*