



BROOME COUNTY COUNCIL OF CHURCHES
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**2013 Membership Agreement
 Membership Renewal Application**

Please make a copy of this sheet for each program that receives food from the CHOW Warehouse.
 e.g. if you have a soup kitchen and a pantry, you must fill out a separate application for each.

1. **Umbrella Organization/Church:** List your 501(c)(3) organization here.
Executive Director/ Pastor: The person responsible for the organization listed above.
 This is the person must sign the **Membership Agreement, Pantry Addendum & Delivery Agreement.**
2. **Program Name:** What do you call your food program? **Type:** What type of food program do you have?
Choices:

Pantry	Shelter	Rehab/Transitional Housing
Soup Kitchen	Youth Program	Residential Program
Day Care	Senior Program	Other (please describe)
3. **Physical Location:** The location where your food is stored and where our truck will deliver your order.
Phone: The number you give out to the public.
4. **Agency Contact:** Name & email address of the person who is the primary contact for the food program.
 This email address will be added to the agency listserv.
5. **Mailing Address for Newsletters:** Location where general mail is sent such as informational letters and newsletters.
6. **Order Contact:** Name, phone number, and e-mail address of the person who is responsible for placing food orders for this program. Email is required to receive order forms.
7. **Delivery Contact:** Name and phone number of the person who will meet the truck if we deliver to your site. Please provide a phone number to reach the delivery contact that is active at the time of delivery.
8. **Secondary Delivery Contact:** Name and phone number of the person that CHOW will contact with delivery information in the event that the delivery contact is unavailable.
9. **Monthly Statistics Contact:** Name, phone number & email address of the person who is responsible for submitting monthly statistics to the CHOW/Broome Bounty.
10. **Service Information:**
Days & Hours of Operation: If you are a residential program, write 24/7.
Geographic Area Served: Please be specific e.g. school district, zip code, city, county, etc
Population Served: Please be specific e.g. seniors, children ages 8 – 12, anyone in need, etc.
Meals Served (meal sites only): Programs that serve meals should include which meals served.
 B=Breakfast, L=Lunch, D=Dinner, S=Snack.
Maximum Occupancy (Residential Programs only): What is the maximum number of residents your agency can accommodate at any given time?
How often can clients come to you for food: Specify once a month, once a week, daily, etc.
How does your agency determine eligibility: Please list any information gathered to determine whether an individual is eligible to receive services from your agency.

2012 Membership Renewal Application

Date: _____/_____/_____

CHOW/Broome Bounty use only

Date Rec'd: _____ Date Entered: _____

Agency Code _____

1. **501 (c)(3) Sponsor Organization/ Church:** _____

Executive Director/ Pastor: _____

Phone: _____ Fax: _____ E-mail: _____

2. **Agency Name:** _____ **Agency Type:** _____

3. **Physical Location Address:** _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

4. **Agency Contact:** _____ **E-mail:** _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

5. **Order Contact:** _____ **E-Mail:** _____

Phone: _____

6. **Delivery Contact:** _____ **Phone:** _____

7. **Secondary Delivery Contact:** _____ **Phone:** _____

8. **Monthly Statistics Contact:** _____ **E-mail:** _____

Phone: _____

9. **Service Information**

Days & Hours of Operation: _____

Geographic Area Served: _____

Population Served: _____

Meals Served: _____ Occupancy: _____

How often can clients come to you for food? _____

How does your agency determine eligibility? _____

Please complete one sheet for each program or location that receives food from the CHOW/Broome Bounty.

To ensure the timely processing of your application, be sure to complete all sections.

For assistance, refer to "New Member Application Instructions" or contact CHOW at 607-772-7898.