



2019-2020 Stakeholder Registration Form

Homelessness and Housing Alliance (HHA) is the lead agency for the Okaloosa Walton Homeless Continuum of Care (CoC) that was formed to develop and implement strategies to eliminate homelessness in Okaloosa and Walton Counties. To become an active CoC stakeholder, please complete the form below and submit with your annual membership dues. HHA and its Stakeholders evaluate the needs of the homeless and work together to create long-term solutions to homelessness. Stakeholders will be invited to attend quarterly meetings and serve on a task group. Agencies that are active participants will have the opportunity to apply for funding through Homelessness and Housing Alliance. Stakeholders will have voting rights and will be eligible to serve on the Board of Directors. **Membership FY 2019-2020 dues must be in no later than June 15th, 2019 to be a voting member of the CoC. The FY begins July 1, 2019 through June 30th, 2020. Be a part of the solution and join us in our efforts to end homelessness!**

Type of Membership

Non-Grant Funded: Individuals/ Agencies in this category will receive voting rights on issues presented to the CoC that impact homelessness in Okaloosa and Walton Counties, an opportunity to serve on a committee and shape the strategies to end homelessness, and an opportunity to serve on the Board of Directors, access to training and technical assistance and HMIS.

(Check any that apply.)

- \$50 Individual Membership
- \$100 Business/Municipality/ Faith Based Org. / Non-profit Agency
- Other Donation (amount: _____)

Grant Funded Agency: Agencies in this category will receive voting rights on issues presented to the CoC that impact homelessness in Okaloosa and Walton Counties, an opportunity to serve on a task committee and shape the strategies to end homelessness, an opportunity to serve on the Board of Directors, access to Technical Assistance/ Training provided by HHA, and opportunities for grant funding through CoC sources.

- \$150 Non-profit budget of \$150,000 to \$249,999
- \$300 Non-profit budget of \$250,000 to \$499,999
- \$400 Non-profit budget of \$500,000 to \$749,999
- \$500 Non-profit budget of \$750,000 to \$999,999
- \$600 Non-profit budget of \$1,000,000 to \$1,999,999
- \$750 Non-profit budget of \$2,000,000 or more
- Check Enclosed
- Paypal www.hhalliance.org

Organization: _____ Website: _____

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____ Fax: _____

**You will be added to the email list serve for the HHA upon receipt of registration.

Organization Information (Check any that apply.)

- Non-Profit Organization
- Faith Based Institution
- For Profit Corporation
- Educational Institution
- Government Entity
- Other: (Please Explain.) _____

Name and title of designated representative that will attend monthly meetings and vote on your organization's behalf.

Name: _____ Title: _____

Phone: _____ Email: _____

Task Groups

- Monitoring and Evaluation Committee
- Housing Committee
- Membership Committee
- Grants Committee
- Planning Committee
- Supportive Services Committee
- HMIS/Data Committee

Mail to: Homelessness & Housing Alliance P.O. Box 115 Fort Walton Beach, FL 32549



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