

# Provider Agency Registration Form

**"FLORIDA Stand Down for Homeless Veterans"**

**09/11/2020**

**Brownsville Community Center**

**CDC Guidelines Will Apply.**

**3200 W. De Soto Street, Pensacola,  
Florida 32505**



**1603 N 58<sup>th</sup> Ave, Pensacola FL 32506**  
**Toll-Free (888) 838-6694 Ext 4**  
**Mary L. Watson**  
**[mlwatson.gcvac@gmail.com](mailto:mlwatson.gcvac@gmail.com)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Needing access to internet services let us Know To receive Access. AVAILABLE FOR COURT & LEGAL SVC.  
My agency can provide Water or Drinks for the food committee. \_\_\_\_ Yes \_\_\_\_\_NO  
Special request - please specify \_\_\_\_\_

***Please return this form to Gulf Coast Veterans Advocacy Council, Inc by fax or email.***  
***Closing Date for Providers Form 09/04/2020 Close of Business.***

