

**CARBON COUNTY PARTNERS FOR PROGRESS, INC.  
MEMBERSHIP APPLICATION**

January 2009 - thru – December 2009

1. Name: (last) _____ (first) _____		
2. Street: _____		
3. P.O. Box: _____		
4. City: _____	State: _____	Zip: _____
5. Home Phone: _____	Work Phone: _____	
6. FAX: _____		
7. E-Mail Address: _____		
8. Are you currently a High School Student? (Circle One)      Yes    /    No		
8. a. Which Carbon County School District are you enrolled in: _____		
9. Occupation: _____		
<b>10. TASK GROUPS INTEREST (Please circle the task group(s) that you might like to serve on.)</b>		
10. a. <b>Business Education</b>	10. b. <b>Economic &amp; Heritage Development</b>	10. c. <b>Health &amp; Human Services</b>
10. d. <b>Public Relations</b>	10. e. <b>Family Collaborative</b>	

11.	
Signature: _____	Date: _____

Please forward your completed Application & Dues Payment of \$10 to:  
**Carbon County Partners For Progress, Inc.**  
**P.O. Box 84**  
**Nesquehoning, PA 18240**

For Treasurers Use Only	Check #		Date Paid
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