



CONNECTING FOR CHILDREN & FAMILIES

Business/Agency Membership Application:

Name of Business/Organization: _____

Contact Person: _____

Address: _____

Phone: _____

Email: _____

Please check one:

\$30 – 10 or fewer employees

\$55 – 11 or more employees

Other – \$ _____

Please make check payable to Connecting for Children & Families and mail to 46 Hope Street, Woonsocket, RI 02895.

Thank you!