

UNSCC

United Neighborhoods of Santa Clara County Membership Agreement

I, the undersigned, representing:

 full name of organization

declare that our organization has read and agrees to abide by the bylaws of United Neighborhoods of Santa Clara County (UNSCC).

www.unscc.org

I also understand that our membership can be terminated if it is found that our organization has either misrepresented itself , does not continue to abide by the bylaws of UNSCC.

I assert that our organization was formed for the overall good of our community and was not formed and/or is not currently maintained to support or oppose 1) anyone running for public office, 2) proposals and/or propositions that ultimately will be voted on by public or government officials, or 3) a single issue, such as a special interest group.

I also understand that we have event insurance coverage only if we have applied for coverage one month prior to each event, and are in receipt of UNSCC's written approval of coverage for each event.

Approval:

 President's Signature

 Print Name

 Date

Our Mission

United Neighborhoods of Santa Clara County is a coalition of neighborhood associations. Our mission is to promote the creation, preservation, and enhancement of healthy neighborhoods through education, resources and outreach.

United Neighborhoods of Santa Clara County Membership Application

Application Process

Once you have completed an application and membership agreement, UNSCC's Executive Director will arrange for at the UNSCC Board Members to meet with a representative from your organization. They will review your application, discuss your organization, and assess your requested UNSCC membership.

If approved, your membership will commence upon payment of dues.

Please inquire for exact amount.

Prior to submitting this application, please be sure your organization understands the qualifications for membership. Please consult with the Executive Director.

This is an application for:

£ General Membership

Contact Information

Organization Name ↑

Mailing Address, City, Zip

Phone Number

Web Address

Email

President ↑

Email

Day Phone

Evening Phone

Address, City, Zip

Vice President ↑

Email

Day Phone

Evening Phone

Address, City, Zip

Secretary ↑

Email

Day Phone

Evening Phone

Address, City, Zip

Treasurer _____ Email _____
Day Phone _____ Evening Phone _____
Address, City, Zip _____

Other: _____ Email _____
Day Phone _____ Evening Phone _____
Address, City, Zip _____

Other: _____ Email _____
Day Phone _____ Evening Phone _____
Address, City, Zip _____

Your UNSCC Representatives

Name of Primary Rep. _____ Name of Alternate Rep. _____

If a representative is not listed amongst the officers above, please include his/her contact information below:

Name _____ Email _____
Phone _____ Address, City, Zip _____

Organization Governance & Meetings

Are board members elected? £ YES £ NO _____

If yes, month of annual elections:

If no, how are your board members and officers selected? _____

Are any board members, officers or organization members paid by the organization? £ YES £ NO

Does the organization have approved bylaws? £ YES £ NO If yes, please attach a copy.

When do you hold Board meetings? _____ Where? _____

When do you hold membership meetings? _____ Where? _____

History & Membership

Month and year organization was formed: _____

Initial reason formed: _____

How do you define membership? (dues, area, etc.) _____

Number of members? _____ How many active members? _____

Geographic Boundaries

Please describe or show the streets, rivers, or other landmarks that define your neighborhood boundaries.



Estimated number of households in your area? _ OR, Estimated number of blocks? _____

Affiliations of Organization

- 1. Is the organization affiliated with any city or county agency? YES NO
- 2. Does the organization receive money from any government agency? YES NO
- 3. Is the organization associated with any other organization? YES NO
- 4. Has the organization received any grants? YES NO

If you answered yes to any of the questions above, please reference question number(s) and explain:

Is the organization affiliated with any special interest group, political candidate or politician? YES NO

YES NO

If yes, please explain: _____

Mission, Issues & Projects

What is the mission or purpose of the organization? _____

What issues, projects, activities, regular events have you undertaken, or are you addressing now? _____

Relationship with UNSCC

What does your organization expect from United Neighborhoods of Santa Clara County? _

What expertise, skills or knowledge can organization offer United Neighborhoods of Santa Clara County?

Application completed by:

Signature _____

Date _____

Print Name _____

Phone Number _____

Title _____

Your adopted bylaws are required, please send copy of those as well.

Thank you for your application to UNSCC!