

UACS Membership Application

Organization Name of Executive Director or Principal Contact	
 Email	

Please complete the following information and email your responses with a scanned version of this form to Jim Jensen at jim@tkjmail.com and mail a hard copy with the \$500.00 membership application fee to **Utah Association of Community Services**, **P.O. Box 58857**, **Salt Lake City**, **UT 84158**. Our Executive Council will evaluate your information at our next monthly Executive Council meeting. Please contact Jim Jensen if you have questions about the Utah Association of Community Services or our membership process.

- 1. Why are you interested in becoming a member of the Utah Association of Community Services?
- 2. What services does your agency/business provide?
- 3. What are the age populations you serve?
- 4. What are your total annual operating expenses?
- 5. With which state agencies do you contract?
- 6. In what geographic areas of Utah are you providing services?
- 7. How many clients are you currently serving?
- 8. How long has your business been in operation?
- 9. Has your agency/business been a member of the Utah Association of Community Services in the past?

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