



Florence Area Community Coalition

P.O. Box 1161, Florence Oregon 97439

www.florenceareacc.org

2025-2026 MEMBERSHIP APPLICATION

**FACC Mission Statement:** To improve the quality of life in Western Lane County through partnerships, networking, volunteerism, community involvement, education and awareness.

Name of Individual/Organization/Business: \_\_\_\_\_

Contact Person (if business or org.): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website (if applicable): \_\_\_\_\_

Hours of operation: \_\_\_\_\_

Brief description of your services: \_\_\_\_\_

Membership Category (check one): \_\_\_ Org/Business (\$50) \_\_\_ Individual (\$25)

Membership in the Coalition is open to all: \* clubs and associations \* government agencies \* religious organizations \* lodges and fraternal organizations \* senior citizen and youth organizations \* law enforcement agencies \* veteran's groups \* hospitals \* physical and mental health care providers \* individuals \* businesses and business groups \*

Dues: \$50 per agency/organization/business per year (July 1 – June 30)  
\$25 per individual, per year.

I would like our organization/agency to be listed in the Service Directory on the

FACC website:  Yes  No

If yes, please email the information for your FACC Service Directory listing to: florenceareacc@gmail.com

**Please return completed application with your check to:**

**FACC, Attention Treasurer, PO Box 1161, Florence, OR 97439**

OFFICE USE ONLY: Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Ck. Number: \_\_\_\_\_