



Application to join The Sonoma County Literacy Coalition

Agency Name: _____

Street Address: _____

City: _____ State: CA Zip: _____

Mailing Address (if different): _____

City: _____ State: CA Zip: _____

Phone: _____ Fax: _____

E-mail: _____ Website: http:// _____

Contact: _____ Parent Agency: _____

Mission:

Service Type: Direct Resource Groups Served: Adult Family Youth

Times of Service: Weekdays Weekend Before School Evenings
 Saturday Summer After School

Number of Sites: _____ Programs: Basic English GED Other...
 ESL Citizenship

Volunteer Needs (circle one): **Yes** No Training Available (circle one): **Yes** No

Please include your \$20 membership fee with the completed form, and send to:

Sonoma County Literacy Coalition
Volunteer Center of Sonoma County
153 Stony Circle, Ste. 100
Santa Rosa, CA 95401
707-573-3372