



**2018 Application and Agreement form for
Immunization Collaboration of Tarrant County Membership**

The **Immunization Collaboration of Tarrant County** is organized and operated exclusively for charitable and educational purposes within the meaning of Section 501 (c) 3 of the Internal Revenue Code. ICTC is a collaboration of agencies, organizations and community members, public and private, committed to providing and coordinating the systematic eradication of childhood, adolescent and adult vaccine preventable diseases in Tarrant County, Texas. **According to the ICTC Bylaws Article II Membership is defined** as: Open to any agency, organization or individual who is committed to the mission of the organization. Member organizations may have **TWO** voting members, submitted by the organization each January. Each individual member shall have one vote. Non voting members are welcome.

Name _____

Type of Membership- Please write ONE TYPE of Member _____

Voting Organization Member Voting Individual Member Non-Voting Member Information only listing

Agency, Organization or Individual representing : _____

Title: _____

Contact Information: Email: _____

Telephone: _____ Cell: _____ Fax: _____

Mailing Address _____

How will you or your agency benefit ICTC? _____

You will receive information about ICTC committee(s) participation and meeting announcements.

Membership Agreement statement:

- Attend at least 2 of quarterly meetings (not applicable to Non-Voting Member) as scheduled in January, April, June and October. Notice of meetings will be sent by email. Meeting times average 1.5 to 2 hours.
- Act in a collaborative manner and allow ICTC to act collectively moving toward the goals stated in the current ICTC Strategic Plan**
- Information only listing will receive special emails.**
- All solicitations and offers of support for ICTC must be reviewed and approved by the ICTC Board of Directors.

Signature _____ Date _____

*Email this form to Alyssa Clader, ICTC Development/Business
Manager: Alyssa Clader (alyssaclader@gmail.com) 817-773-0742*

