

**Meals On Wheels Association of Texas
Membership Application and Data Collection Form**

Memberships in the Meals On Wheels Association of Texas (MOWAT) are organizational memberships. Each member organization can name a maximum of two individuals to receive email and other forms of communication. The organization will receive one vote. Membership is limited to direct providers of home delivered or congregate meals. Membership dues are payable annually in January and expire in December.

MOWAT dues are based on the meal program budget:	
Budgets under \$1,000,000	\$ 50
Budgets between \$1,000,000 and \$2,500,000	\$100
Budgets in excess of \$2,500,000	\$250

IMPORTANT MEMBER DATA

Date: _____

Primary Contact:

Organization Name: _____

Primary Contact Name: _____ Title: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Fax: _____ Website: _____

Alternate Member Contact:

Alternate Contact Name: _____ Title: _____

Phone: _____ Email: _____

The following information about your organization will assist MOWAT in creating a snapshot of all programs in Texas.

How many unduplicated clients do you serve annually _____

Total number of meals served annually _____ How many are Home Delivered _____, Congregate _____

What is your annual budget Total Agency _____ Meal Program _____

How many people do you employ Total Agency _____ Meal Program _____

If applicable, how many people are employed by your contract kitchen management company _____

Does your Agency provide services other than meals _____

Are you a member of the Meals On Wheels Association of America _____

Would you be interested in serving on a MOWAT committee _____ If yes, please indicate your preference below

Membership

Finance

Conference

Legislation / Advocacy

Communication / Public Relations

<p><i>Please complete this form and mail it along with your check to:</i></p> <p>Meals On Wheels Association of Texas Attn: Carla Jutson, Treasurer 320 South Freeway Fort Worth, TX 76104</p>	<p><i>For membership questions please contact:</i></p> <p>Bridget Samuels Email: bsamuel@img.org Phone: (713) 533-4906</p>
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Date Received: _____