

AGENCY INFORMATION



Complete all applicable information on this form. You may attach brochures or other documentation which may aid in a better understanding of services provided.

Please type or print.

- Attach a copy of your IRS 501(c)s (if applicable).
- Mail to: United Way 2-1-1, PO Box 91068, Mobile, Alabama 36691-1068

Date _____

Agency Name _____

Contact Person _____ Title _____

Physical Address _____

City _____ County _____ State _____ Zip _____

County(ies) served: Mobile Washington Clarke Monroe Choctaw

Mailing Address _____

City _____ County _____ State _____ Zip _____

Telephone Number (Day) _____ After Hours _____

Fax Number _____

E-mail of contact person: _____ Website: _____

Hours/Days of Operations: _____

Agency Type (check one)

Private, Non-profit

Public, Non-profit

Faith-based

Governmental

Profit

Volunteer

Not Classified

Membership

Other: _____

Agency Description: _____

