



2012 Human Race Nonprofit Agency Form



Please send this form to:
Volunteer Center of Sonoma County
 153 Stony Circle Suite 100, Santa Rosa, Ca 95401
 707.573.3399 Fax: 707.573.3380 www.humanracenow.org

Check Agency Type:

(YOU MUST submit documentation verifying Agency's Tax-exempt status if you havn't before)

501c3 # _____ Tax-Supported Entity(School/Government) Faith-Based Organization

This form MUST be turned in before January 31 for a chance to win cash prize at the Breakfast of Champions for your nonprofit agency. (Do not need to be present to win)
All information must be completed to process your entry form.

****PLEASE PRINT CLEARLY****

| | | | | |
|---|--------------|--------------------------------|-------|-----|
| Agency Name | | | | |
| Program Name (if different from Agency name) | | | | |
| Agency's Mailing Address | Street/Suite | City | State | Zip |
| Agency's Physical Address (if different from Mailing address) | Street/Suite | City | State | Zip |
| Agency's Main Phone Number: | | Agency's Fax Number: | | |
| Website Address: | | Agency's Email Address: | | |

| | | |
|----------------------------------|---------------------|-----------------------|
| Executive Director | Phone Number | E-Mail Address |
| What does your Agency do? | | |

HUMAN RACE Coordinator/Contact Information

| | | |
|---|------------------------------|-----------------------------|
| Name | | |
| E-Mail Address | Day Time Phone Number | Evening Phone Number |
| Would you like to receive a Human Race E-News Letter? | | YES NO |
| Is the Agency New to the Human Race | | YES NO |
| What year did you last participate in Human Race _____ | | |

Volunteer Center Use Only CR: _____ VRS: _____ F/D: _____ H/R Comp: _____