

**COVENANT FORM 2008
FORT COLLINS AREA INTERFAITH COUNCIL**

Agency Name _____
Address _____
E – mail address: _____ Phone _____ (zip) _____

WE ARE COMMITTED TO MEMBERSHIP IN INTERFAITH COUNCIL THIS YEAR: Y N

WE ARE COMMITTED THROUGH OUR REPRESENTATIVES: ** (Each agency is entitled to one voting member. You are asked to identify an agency representative, and an alternate, if possible).

1. Representative _____
Address _____
_____ (zip) _____ phone _____ E-mail address _____

2. Alternate _____
Address _____
_____ (zip) _____ phone _____ E-mail address _____

WE WILL ALSO PARTICIPATE IN THE FOLLOWING WAYS:

_____ **PRESENTATIONS** of programs and activities our agency provides.

PROMOTE the projects and programs of Interfaith in our agency through announcement of information, recruitment of volunteers and active participation in functions, such as,

_____ **FOOD DRIVE(S);** _____ **CROP WALK;** _____ **HUMANITARIAN CANNING;**
_____ **HOMELESSNESS PREVENTION FUNDRAISING;** _____ **CITY WIDE FAST**

Member faith communities and agencies are invited (if they are able) to serve as **HOSTS** _____ (month)

COMMITTEE MEMBERSHIP - our representatives **and other interested members** (name the persons) of our agency will serve on the following teams:

Health:

Social Concerns:

Food:

Housing:

Membership:

SIGNED: _____ Date _____
NAME: (print) _____ Position _____

PLEASE MAKE A COPY OF THE COMPLETED COVENANT FOR YOUR FILES.

**RETURN ORIGINAL TO: FORT COLLINS AREA INTERFAITH COUNCIL
 P. O. BOX 270256
 FORT COLLINS, CO 80527-0256**

Please list on back side of this form the names of other persons in your agency who also should receive the Interfaith Newsletter; e.g., Newsletter Editor.

****All members of participating agencies are welcome at meetings of the Interfaith Council.**