

CASRA MEMBERSHIP APPLICATION

Agency Contact Person: _____

Agency Name: _____ Federal Tax ID #: _____

Agency Address: _____

City, State: _____ Zip Code: _____

Work number: (____) _____ Fax Number (____) _____

E-mail Address: _____ Web Address: _____

APPLICATION FEE

Applicant agencies are required to submit a non-refundable application fee of \$ 250.

TYPES OF SOCIAL REHABILITATION SERVICES PROVIDED:

- | | |
|--|---|
| <input type="checkbox"/> Patient rights | <input type="checkbox"/> Full service partnership |
| <input type="checkbox"/> Case management/brokerage | <input type="checkbox"/> Day rehabilitation |
| <input type="checkbox"/> Self-help/Wellness Center | <input type="checkbox"/> Permanent housing |
| <input type="checkbox"/> Supported education | <input type="checkbox"/> Transitional housing |
| <input type="checkbox"/> Supported employment | <input type="checkbox"/> Support for permanent housing |
| <input type="checkbox"/> Vocational services | <input type="checkbox"/> Support for transitional housing |
| <input type="checkbox"/> Homeless day services | <input type="checkbox"/> Crisis residential treatment |
| <input type="checkbox"/> Socialization/Community integration | <input type="checkbox"/> Transitional residential treatment |
| <input type="checkbox"/> Medication clinic | <input type="checkbox"/> Long-term residential treatment |
| <input type="checkbox"/> Agency run business enterprise | <input type="checkbox"/> Other _____ |

ABOUT YOUR AGENCY:

Number of persons served per yr: _____

Number of staff (F.T.E.) _____

To submit your application:

1. Complete the information requested above.
2. With the completed application, send the following:
 - a. Board of Directors roster
 - b. Copy of most recent Board meeting minutes
 - c. Copy of 501(c) 3 letter from the Internal Revenue Service
3. Send all the information along with a check for \$ 250 to CASRA, P.O. Box 388, Martinez, CA 94553.

*Dedicated to improving services and social conditions
for people with psychiatric disabilities by promoting
their recovery, rehabilitation and rights.*

A diagnosis is not a destiny.