



*Ensuring every North Dakotan has access to a decent, safe, affordable, accessible place to live.*

## Membership Application

Organization: \_\_\_\_\_

Representative: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Alternate Representative: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

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**In order for HAND to identify your interests, expertise, and better meet your needs, please provide the following information:**

**What is the mission of your organization?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Continue on the next page.

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What benefits would you like to gain through HAND membership and participation? \_\_\_\_\_

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What contributions can you bring to HAND? \_\_\_\_\_

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Do you serve on other housing related boards or committees? \_\_\_\_Y \_\_\_\_N If yes, please explain:

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The Housing Alliance of North Dakota's (HAND) Mission is, *A statewide network established to identify and address the diverse unmet housing needs in North Dakota.*

I/We support the mission of the Housing Alliance of North Dakota (HAND) and agree to attend and participate in HAND activities and efforts to the fullest extent possible.

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Signature

Date

Please return to:

Tom Alexander, Chair HAND Board  
500 University Ave West  
Minot, ND 58707  
Toll free: 800.233.1737  
Fax: 701.858.3483  
Email: [tom.alexander@minotstateu.edu](mailto:tom.alexander@minotstateu.edu)

