



## Virginians for a Healthy Future

Membership Form 2008-2009

Mission: *To improve the health, education and welfare of Virginia's children, families, and communities by reducing the use of tobacco products in Virginia.*

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Organization Web Address: \_\_\_\_\_ Number of Members, if applicable: \_\_\_\_\_

Additional email addresses of individuals who should receive updates from VFHF?

\_\_\_\_\_

In-Kind Resources (examples include providing meeting space; administrative support; office and meeting supplies; copying; training and technical assistance; public education efforts; direct advocacy and lobbying; testimony; policy development and analysis): \_\_\_\_\_

\_\_\_\_\_

**Please complete and return to:**

Virginians for a Healthy Future  
P.O. Box 3737, Glen Allen, VA 23058-3737  
Fax: (804) 643-4490  
Phone: (804) 225-5828  
E-mail: Nicole@vfhf.org

Visit [www.smokefreevanow.org](http://www.smokefreevanow.org) for additional information

Individuals and organizations completing this membership form may be listed on VFHF materials or used in connection with actions/policies approved by the coalition. Written requests for exceptions should be included with this form, or mailed to the address above.