

# The Washington Heights-Inwood Genetic Education and Evaluation (GENE) Project

## MEMBERSHIP APPLICATION

We invite YOU to become a member of WHI GENE Project—a community-wide coalition of individuals and organizations engaging in community training, awareness, education, and a community needs and assets assessment, regarding issues of genetics. Our ultimate goal is to create a network in Washington Heights-Inwood that will increase and improve access to culturally and linguistically-appropriate genetics information and services.

If you are interested in joining our group, please fill out the following information:

1. Name: \_\_\_\_\_  
                                    First Name                                      Initial                                      Last Name
  
2. Address: \_\_\_\_\_  
                                    Number/Name of Street or Avenue                                      Apt. #  
  
\_\_\_\_\_   
                                    City, State, Zip Code
  
3. Name of Organization: \_\_\_\_\_
  
4. Title: \_\_\_\_\_
  
5. Phone: \_\_\_\_\_                                      6. Fax: \_\_\_\_\_
  
7. E-mail: \_\_\_\_\_
  
8. Would you like to be added to the WHI Coalition listserv? (Check one.) Yes\_\_\_\_ No\_\_\_\_
  
9. How would you prefer to receive updates? (Check all that apply.) Email\_\_\_\_ Regular Mail\_\_\_\_ Fax\_\_\_\_ Phone\_\_\_\_
  
10. With what racial or ethnic group or country do you identify with? \_\_\_\_\_
  
11. What type of membership do you represent? (Check one.) Individual\_\_\_\_ Organization \_\_\_\_
  
12. Which committee(s) would you like to participate in? (Check all that apply.)  
  
Community Awareness\_\_\_\_ Education/Training\_\_\_\_ Community Needs and Assets Assessment\_\_\_\_
  
13. **Signature:** \_\_\_\_\_                                      **Date:** \_\_\_\_\_

Please distribute this application to fellow community residents and organizations in your area that may be interested.

**Please return this form during the coalition meeting or mail or fax to:**

**WHI GENE COALITION**  
c/o Dominican Women's Development Center  
519 189<sup>th</sup> St.  
New York, NY 10040  
Fax: (212) 994-6065

For more information, please visit our listserv web page at: [http://www.groups.yahoo.com/group/gene\\_coalition](http://www.groups.yahoo.com/group/gene_coalition).