

**New Hampshire Juvenile Court Diversion Network
2008 Membership Form**

Organization/Agency Name: _____

Mailing Address: _____

City/Town: _____ Zip _____ County _____

Phone: _____ Fax _____

Organization/Agency website: _____

Please identify the primary contact for the Network at your agency or organization

_____ E-Mail Address _____

Please identify other employees or individuals in your agency or organization that may be active in the Juvenile Court Diversion Network

_____ E-Mail Address _____

_____ E-Mail Address _____

_____ E-Mail Address _____

*2008 Annual Network Membership Fee is **\$35.00** for Diversion programs.

Please return membership form to:

**NHJCDN C/O The Office of Youth Services
PO Box 550
Hillsboro, NH 03244**

____ Yes, I would be interested in serving on a committee

____ Yes, I would be interested in serving as a board member

NH Juvenile Court Diversion Web Site : www.nhcourtdiversion.org