

**New Hampshire Juvenile Court Diversion Network
2010 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 _____

***2010** Annual Network Membership dues are **\$25.00** for Diversion Programs if paid for by March 31st, 2010. **\$35.00 after March 31st.**

Please return membership form & dues 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 or officer

NH Juvenile Court Diversion Website: www.nhcourtdiversion.org