



Suite 1126 Coleman Young Municipal Center
2 Woodard Ave. Detroit, MI 498226

Block Club/Community Organization Registration Form

Complete this form and return to your District Manager or mail to the Dept. of Neighborhoods at the address above

Organization's Name: _____

District _____

Type of Organization: _____ Block Club _____ Neighborhood Association
_____ Business Association _____ Community Development Corp. _____ Other

Contact Email (public only): _____

Mailing Address (optional): _____

Meeting Date: [Example: 1st Mon. of each month):

Date: _____ Time: _____

Meeting Location (address): _____

Current number of members: _____ **Date of last election of officers:** _____

Year group was founded: _____

Boundaries:

North St. _____ South St. _____

East St. _____ West St. _____

NOTE: The Dept. of Neighborhoods will not publicly disclose any personal information provided on this form. We will post on the website only the organization name, public email, boundaries, meeting date, time, and meeting location, **unless** the location is a private residence. Please check the appropriate box below and sign it to indicate if this information can be shared.

Yes, please post our organization's information on the city website

No, please do not post our organization's information on the city website

Signed By: _____ Title: _____

DATE: _____

Officers' Contact Information (President, Vice President, Treasurer, Secretary):
(FOR INTERNAL USE ONLY—NOT TO BE POSTED OR DISTRIBUTED)

Name: _____ **Title:** _____

Address: _____ Zip Code: _____

Daytime Phone: (____) _____ Email: _____

Name: _____ **Title:** _____

Address: _____ Zip Code: _____

Daytime Phone: (____) _____ Email: _____

Name: _____ **Title:** _____

Address: _____ Zip Code: _____

Daytime Phone: (____) _____ Email: _____

Name: _____ **Title:** _____

Address: _____ Zip Code: _____

Daytime Phone: (____) _____ Email: _____