



“Connecting Communities”

2018 Membership Application and Memorandum of Understanding

I. MISSION. The mission of The Coalition of Behavioral Health Services (the “Coalition”) is to unite community stakeholders to prevent and reduce the problem and effect of alcohol, tobacco, and other drug use and related mental and physical health disorders in communities within Greater Houston.

II. OUR GOALS.

- A. Develop strong collaborations between Houston/Harris County and the greater metropolitan community to support and expand existing prevention, intervention, treatment, and long-term recovery efforts.
- B. Reduce substance use among youth in Houston/Harris County and the greater metropolitan community.
- C. Develop a shared vision for health and quality of life in our community.
- D. Increase community awareness of substance abuse and co-occurring mental and physical illness and the risk factors associated with each.
- E. Establish healthy alternatives for our community while reducing use of alcohol, tobacco, and other drugs.

III. TERMS AND UNDERSTANDING

CBHS will:

1. Advocate for membership concerns at local, state and federal level of governments through collaboration with advocacy collaboratives along with periodic legislative updates.
2. Maintain a website as an information resource offering members a vehicle to highlight programs and needs.
3. Provide opportunities to network with others in the human services field.
4. Provide opportunities to keep abreast of changes and opportunities in the field.
5. Publicize opportunities to collaborate in projects that meet goals of the Coalition.
6. Conduct periodic CEU opportunities at reduced or no cost to members.
7. Provide letters of support for viable proposals for funding to fill gaps in service delivery.

Members will:

1. Work together to support the mission and achieve the goals and objectives of the Coalition.
2. Commit to have a representative attend and actively participate in Coalition meetings and other sponsored activities.
3. Maintain open communication with each member of the Coalition.
4. Respect each individual agency’s right to make decisions that are in the best interest of their organization.
5. Adhere to the conflict resolution policy, as outlined in the bylaws, to resolve conflicts that arise between member agencies.
6. Respect and safeguard the rights of individuals to have confidentiality within the limits of the law.
7. Pay membership dues.

501 Garden Oaks Boulevard, Houston, Texas 77018
281-630-8665 cell - Fax 713-862-1849
www.cbhshouston.org – cbhshouston@yahoo.com

MEMBER ORGANIZATION INFORMATION:

Organization _____

Contact Person _____

Mailing Address _____

Phone #s _____

Email _____

Website _____

Please remember to remit \$50 (individuals) or \$100 (organizations) with application. Make checks payable to CBHS and mail to Coalition of Behavioral Health Services, 501 Garden Oaks Boulevard, Houston TX 77018.

You can also pay using PayPal or credit card. Got to www.cbhshouston.org home page.

This MOU shall expire on **December 31, 2018**.

Print Name

Signature


Title

Organization

Date:

Sandy Olson

Print Name

Signature 
Executive Director

Title
Coalition of Behavioral Health Services

Organization

Date: