***How do you want to continue to be involved*** in the Cancer Network’s mission to reduce the impact of cancer on individuals and communities in Maine through collaboration and systems improvement?

Please check as many options as you are interested in.

* **Stay Informed:** Be added to the Cancer Network’s listserv enabling you to receive communications and stay up to date on the latest activities and information.

**Yes, I want to stay informed about the Cancer Network: \_\_\_\_\_**

* **Join a Task Force:** Join a group of individuals or organizations working collaboratively to address the Cancer Network’s common agenda. These groups are time limited and work on specific projects.

**Yes, I commit to being a Task Force member: \_\_\_\_\_**

*I’m most interested in (check all that apply):*

* + Collaboration within and between the health systems (Goal 1): \_\_\_\_\_\_\_\_
	+ Access to transportation and care (Goal 2): \_\_\_\_\_\_\_\_
	+ Education on cancer prevention, detection, and treatment (Goal 3): \_\_\_\_\_\_\_\_
	+ Cancer advocacy efforts (Goal 4): \_\_\_\_\_\_\_\_
	+ Support for survivors (Goal 5): \_\_\_\_\_\_\_\_
	+ I am not sure yet: \_\_\_\_\_\_\_\_
* **Join a Data Team:** Join a group of individuals with backgrounds in epidemiology and statistics and familiarity with data about cancer, cancer risk factors, and protective factors for cancer, who will work with the Leadership Roundtable and Task Forces to track progress toward the common agenda.

**Yes, I commit to learning about my potential role as a Data Team member: \_\_\_\_\_**

* **Join the Leadership Roundtable (LRT):** Join a group of individuals representing the four sectors who provide overall strategic guidance and leadership to the Cancer Network.

**Yes, I commit to learning about my potential role as a LRT member: \_\_\_\_\_**

* **Provide financial support:** A business, foundation, or individual who is able and willing to provide backbone support in the form of funding for the Cancer Network.

**Yes, I commit to learning about my potential role as a financial supporter: \_\_\_\_\_\_**

**­­**

**Name:**

**Organization (optional):**

**Email:**

**Phone:**