

**Georgia River Network**  
**Directory of Watershed Groups**  
Information Form

Please fill out the following information as you would like it to appear in the directory:

Organization's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Main Phone Number: (\_\_\_\_) \_\_\_\_\_ Ext: \_\_\_\_\_

Main Fax Number: (\_\_\_\_) \_\_\_\_\_

Main Organizational E-mail Address: \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Please provide us with information about the primary contact person for the organization (for example, the Executive Director or the Board President):

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position or Title: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Please provide us with contact information other than the person listed above (i.e. staff members or board officers) and continue on the back of this page if necessary:

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Organization's Mission Statement:

How does your organization define its boundaries? (i.e. Do you cover the Upper Ogeechee Watershed as defined by the U.S. Geological Survey 8 digit HUC? Or do you serve certain counties?)

What is the approximate size of the watershed or the area that your group covers?

On which streams, creeks, rivers, lakes, wetlands, or tributaries do you primarily focus?

What are the primary watershed issues or threats that concern your organization?

What types of activities or tools does your organization use (i.e. education, monitoring, litigation, clean-ups, etc.) to protect your watershed?

Would you consider yourself to be an advocacy organization?      Yes      No

What do you consider to be your organization's recent successes? (Brag shamelessly!)

What are some ways that your organization can assist others?

What year was your organization founded?

By Whom?

Tell us more about your organization:

Georgia River Network will use the following information in order to provide the best possible service to your organization. *All the following will be kept confidential.*

Please state your non-profit status with the IRS:

- 501(c)3       501(c)4       Will apply for 501(c)3 soon  
 Don't Know       Other

Annual Budget: \_\_\_\_\_

Primary Funding Sources:

Number of Paid Staff People (if any): \_\_\_\_\_ Number of Board Members: \_\_\_\_\_

Number of Paying Members: \_\_\_\_\_ Cost of Individual Membership: \_\_\_\_\_

Do you have a strategic plan?       Yes       No

Do you have a fundraising plan?  Yes       No

In what ways can Georgia River Network be most useful to you in order to increase your effectiveness in protecting your watershed?

Please check which services provided by Georgia River Network may be of interest to your organization:

- Meeting facilitation
- Assistance with Strategic Planning
- Training Board of Directors
- Assistance with fundraising / planning
- Media assistance / consultation
- Implementation of a particular campaign or project

Do you participate in citizen water quality monitoring?       Yes       No

Are you interested in participating in monitoring?       Yes       No

*Thank you for taking the time to fill this out!*

*Please mail to 126 S. Milledge Avenue, Suite E3, Athens, GA 30605 or email to [info@garivers.org](mailto:info@garivers.org).*