

HOW TO UPDATE THE INFORMATION CONTAINED IN THIS GUIDE

For agencies/ programs already in the guide: We will contact you in September to verify current entries. **Do not send back this form.**

For new agencies: Please complete the information requested below and mail to:

**Jennifer Shaoul
YAI / NIPD
460 West 34th Street
11th Floor
New York, NY 10001
(212) 273-6289**

Please include the name of the program, the location, the time services are provided, the population served, the cost of services to families, the services given, and the telephone number and contact person for the program. It is important that you indicate a category (see Table of Contents) that best reflects the service you provide.

*CATEGORY _____
NAME OF AGENCY / PROGRAM _____
ADDRESS OF PROGRAM _____

CONTACT PERSON/PHONE# _____
POPULATION SERVED _____
DESCRIPTION OF PROGRAM _____
YOUR NAME AND PHONE _____

***PLEASE SEND A NEW FORM FOR EACH ENTRY. You must use existing categories.**