

# Project Uplift

Registration Form

Friday, February 7<sup>th</sup> 2025 10am – 2pm

Douglas Dollarhide Community Center 301 N. Tamarind Ave. Compton 90221

Company name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Website: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Services Provided: \_\_\_\_\_

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Names of Company Representatives attending:

1. \_\_\_\_\_

2. \_\_\_\_\_

**FOR ADDITIONAL INFORMATION, PLEASE CONTACT TENE SPEARS, COORDINATOR/  
COUNCIL LIAISON AT 310.386.6505 / TSpears@COMPTONCITY.ORG**