

Volunteer Administrators Network Member Application

<http://vancentralohio.org/>



A description of each membership type is listed at the bottom of the page. All memberships expire on June 30th. Once we receive your payment, you will receive a confirmation email with instructions on how to log in to the VAN website and join the member directory. If sending payment for multiple memberships, please fill out one form for each member.

SECTION 1: MEMBER CONTACT INFORMATION

FULL NAME	
AGENCY/CORPORATION	
TITLE/POSITION	
WORK PHONE/CELL	
EMAIL ADDRESS	

SECTION 2: MEMBERSHIP TYPE

MEMBERSHIP TYPE	MEMBERSHIP DESCRIPTION	PLEASE CHECK
INDIVIDUAL (NON-TRANSFERABLE) \$60	Member works with volunteers in for-profit corporation, not-for-profit or government agency. This membership travels with individual should they change positions.	<input type="checkbox"/>
STUDENT/VOLUNTEER/AMERICORPS/ SUSTAINING \$20	Member is either a student enrolled in college level program or a volunteer active with an agency, or is currently working for the AmeriCorps program, or has been a VAN member for at least five years and is not currently employed in volunteer administration.	<input type="checkbox"/>

SECTION 3: ADDITIONAL INFORMATION

How long have you been a volunteer administrator?			
How long have you been a member of VAN?			
Were you referred to VAN by a current member:	No	Yes	If yes, who?

Please check your areas of interest for possible participation:

<input type="checkbox"/> Publicity	<input type="checkbox"/> Professional Development/Presenter	<input type="checkbox"/> Awards
<input type="checkbox"/> Hospitality	<input type="checkbox"/> Membership	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Board Position	<input type="checkbox"/> Conference Planning	<input type="checkbox"/> Serve as a Mentor

Make check payable to Volunteer Administrators' Network
Please mail check and form to:
Volunteer Administrators' Network, P.O. Box 16353 Columbus, OH 43216

OFFICE USE ONLY:	
Form of payment: Credit Card Check Ck#: _____	Check Type: _____
Date payment received: _____ Renewal Date: _____	