

**Membership Application**

**WHY JOIN ALIVE?**

ALIVE offers a professional network for those in the field to share experiences, best practices and knowledge. This fast growing, dynamic organization will use its collective voice to advocate for professionalism in volunteer engagement.

in volunteer engagement  
Leaders  
VOLUNTEERS



ASSOCIATION OF LEADERS IN VOLUNTEER ENGAGEMENT

**CONTACT INFORMATION**

[Text input field]

Prefix / First Name / Middle Initial / Last Name / Suffix

[Text input field]

Title

[Text input field]

Organization

[Text input field]

Address

[Text input field]

City

State

Zip

[Text input field]

Preferred Phone

Fax

[Text input field]

Email

[Text input field]

Web Site Address

**OTHER INFORMATION:**

Select the category that best describes your organization (*please select one*):

- Non Profit
- Government
- Unaffiliated
- For Profit
- Education

Select the categories that best describe your work (*select all that apply*):

- Animals
- Hunger
- Library
- Arts and Culture
- Individual/Consultant
- Political Action
- Disabilities
- Faith Based
- Seeking Employment
- Education
- Health & Wellness
- Seniors
- Environment
- Housing/Homelessness
- Youth

Other: [Text input field]

I am a member of a local AVA, DOVIA or other professional volunteer management association. Please list: [Text input field]

I am interested in becoming more involved with ALIVE. Please contact me.

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**MEMBERSHIP SELECTION**

- New Member       Renewal

**Individual Membership Categories:** For individuals who are focused on or related to the field of volunteer engagement and those who coordinate, manage and lead volunteers. Each member shall have equal voting rights in the matters of ALIVE.

- Individual**, focused on the field of volunteer management      \$50  
 **Associate**, engaged in fields related to volunteer management:      \$45

Number of years in the field:

**Group Membership:** For groups who are focused on or related to the field of volunteer management. Group entities shall appoint one representative to receive and give information to and from ALIVE and to cast one vote on behalf of the group in the matters of ALIVE.

- Less than 50 members:      \$100  
 51-100 members      \$200  
 More than 100 members      \$300

**Additional Contribution:** To ensure the sustainability of ALIVE I would like to make an additional contribution:

- \$100       \$50       \$25       Other: \$

**PAYMENT TOTAL:**

**PAYMENT METHOD:** *(Note: Credit card payments will be processed through our secure site)*

- Credit Card       Cash       Check *(please make payable to ALIVE)*

**Credit Card:**       Visa       MC       AE       Discover

Credit Card No.      Expiration

Name on Credit Card      Security code\*

Signature

*(\*The Security code is a 3- or 4-digit code found on either the back or front of your credit card. We need this information to process payments through our secure site.)*

**MAIL OR FAX APPLICATION AND PAYMENT TO:**



12400 Hwy. 71 W.  
Ste. 350-382  
AUSTIN, TX 78738  
**FAX: 303.374.8011**