



# MEMBERSHIP AGREEMENT

Membership year: April 1,2021 to March 31,2022

Organization Name:  
 Mailing Address:  
 City and Province: Postal Code:  
 Phone: Fax:  
 Website:  
 Charitable/Not-for-Profit Registration #:

Volunteer Contact:  
 Email:  
 Executive Director:  
 Email:  
 Secondary Contact:  
 Email:

**As a member, I agree to:**

- Follow best practices of volunteer management, including guidelines set out in the *Canadian Code for Volunteer Involvement*;
- Keep volunteer position postings current in plain language;
- Notify the Volunteer Action Centre of any contact information changes in my organization.
- Extend courtesy to prospective volunteers by contacting them in a timely and respectful manner, even if their placement will not be immediate;
- Refer prospective volunteers to the Volunteer Action Centre if a placement within my organization is not possible;
- Consult with VAC staff for service orientation if desired.

**Authorized Signature:**

**Date:**

\_\_\_\_\_ **Full Membership \$200**  
 \_\_\_\_\_ **Special Rate \$100 (upon approval)**

**Please complete MEMBERSHIP AGREEMENT and forward payment to:**

Volunteer Action Centre  
 1454 King St. E., Unit 3,  
 Kitchener, ON N2G 2N7

Attn: Dianne Boston-Nyp, [dianne@volunteerwr.ca](mailto:dianne@volunteerwr.ca)  
 P 519-742-8610 | F 519-742-0559

Cheques payable to Volunteer Action Centre Waterloo Region.  
 Receipts will be emailed upon payment.  
 Invoices available upon request.  
 Credit Card Payments can be made by phone or Paypal.

**For office Use ONLY**

- \_\_\_ Invoice Tracking Form
- \_\_\_ Updated Member Portal
- \_\_\_ Receipt Complete

**Payment Type:**

- \_\_\_ Cheque
- \_\_\_ Credit card