



DURHAM REGION ASSOCIATION FOR VOLUNTEER ADMINISTRATION

8 – 1288 Ritson Rd. N., Suite 329
Oshawa, Ontario L1G 8B2

2010 MEMBERSHIP APPLICATION

STATUS:

- All that apply*
- New Member
- Renewal
- Personal Membership
- Agency Membership

FEE PAYMENT INFORMATION:

\$40.00 annual membership

- Cheque*
- Cash
- Money Order*
- Membership & Conference (\$140)

AGENCY INFORMATION:

*Payable to: *Durham Region Association
For Volunteer Administration*

Agency Name _____

Street Address _____

City _____ Postal Code _____

Telephone (905) _____ Fax (905) _____

E-Mail Address _____ Website _____

REPRESENTATIVE INFORMATION:

Representative Name _____

Title _____

Executive Director _____

Number of Volunteers _____ Number of Hours _____

- Yes I agree to have my agency contact information distributed to DRAVA Members only.

SIGNATURE:

DATE:

FOR OFFICE USE ONLY

Date Received _____ Cheque Number _____ Receipt Number _____

Treasurer _____

Membership Chair _____

Date: _____

- By-Laws Sent
- Welcome Letter Sent