

Wake Association Volunteer Administration
Member Agency Website Description

WAVA MEMBER AGENCIES:

_____ Currently a member agency

_____ My agency check for _____ agency membership(\$50) or _____ individual membership (\$25) is enclosed

BRIEF DESCRIPTION FOR WAVA WEBSITE(WAVA ADMINISTRATION RESERVES THE RIGHT TO EDIT CONTENT FOR APPROPRIATENESS AND SPACE.

1. Agency name
2. Brief description of agency
3. Main website address
4. Agency physical address
5. Primary volunteer contact – name, phone, e-mail
6. Brief description of volunteer positions / duties – this is generic information and not specific to any given moment in time
7. Specifications on volunteer positions – part time, flex hours, qualifying requirements, etc.
8. Optional: pictures of volunteers participating in events
9. Optional: if your agency has a volunteer sign application and would like to have it downloadable from the WAVA site, please provide as a PDF file
10. Optional for future pages: calendar of upcoming events for which volunteers would be needed, if possible with photos of prior year events

OTHER INFORMATION: _____

Authorized Signature of Member Agency

Date

Please mail check to : WAVA
P. O. Box 12756
Raleigh, NC 27605

Or email form/pics to: rtemple@waketeen.org