

**OCEANSIDE VOLUNTEER ASSOCIATION**  
#103 – 198 East Island Highway, Box 1745, Parksville, BC V9P 2H3  
Phone: 250-248-2637 Fax: 250-248-2647  
Email: oceansidevolunteer@shaw.ca

**Member Organization Profile**

Membership for one year allows you to list your volunteer requests with us and as well receive volunteer referrals. Membership has many other benefits including attending the monthly Member Organization Meeting. This is your opportunity to share and network with other non-profit agencies. Oceanside Volunteer Association is a member of Volunteer Canada & Volunteer BC and we regularly receive resources and information which, as a member, you will have access to. Please see the “Advantages & Services” list for more details on membership benefits. Please send us a cheque for \$50.00 made payable to “Oceanside Volunteer Association” along with 20 copies of your brochures and this completed form. If you prefer, you can drop this information off in person and give us a chance to meet our newest member!

1. Organization Name: \_\_\_\_\_

Address: (Street & Mailing) \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: (     ) \_\_\_\_\_ Fax # (     ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

2. Executive Director/Manager: \_\_\_\_\_

3. Program Name: \_\_\_\_\_

4. Contact Person/Title: \_\_\_\_\_

\_\_\_\_\_

5. Program Hours \_\_\_\_\_

6. Do you have volunteers at your organization? Yes: \_\_\_\_\_ No: \_\_\_\_\_

7. If yes, Volunteer Coordinator’s Name: \_\_\_\_\_

Phone Number: (     ) \_\_\_\_\_ Fax # (     ) \_\_\_\_\_

**8. Program Address: (street & mailing if different from above)** \_\_\_\_\_

\_\_\_\_\_

**9. Description of Services:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10. Special Events:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**11. Area Served: Parksville** \_\_\_ **Qualicum** \_\_\_ **Coombs/Errington** \_\_\_ **Bowser** \_\_\_ **Port Alberni** \_\_\_

**Nanaimo** \_\_\_ **Courtenay/Comox** \_\_\_ **Other** \_\_\_\_\_

**12. Client Referral Source: (i.e.: Ministry, Doctor, Newspaper, Radio, Self...)** \_\_\_\_\_

\_\_\_\_\_

**12. Fees? Yes:** \_\_\_ **or** **No:** \_\_\_ **If Yes, (CIRCLE): SET or SLIDING**

**13. Client Eligibility/Requirements: (Youth, Women, Men, etc...)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**14. How is your organization funded? (Ministry, United Way, Donations, etc...)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**15. Areas of Interest (workshops, etc):**    **Volunteer Management** \_\_\_\_

**Volunteer Training** \_\_\_\_    **Volunteer Placement** \_\_\_\_    **Dealing with Problem Volunteers** \_\_

**Grant Writing** \_\_\_\_    **Fundraising** \_\_\_\_    **Planned Giving** \_\_\_\_    **Annual \$ Campaigns** \_\_\_\_

**Strategic Planning** \_\_\_\_    **Board Member Recruitment** \_\_\_\_    **Committee Development** \_\_

**Board Development** \_\_\_\_    **Using the media** \_\_\_\_    **Legal & Liability Issues** \_\_\_\_    **CCRA issues** \_\_\_\_

**16. Please feel free to add and additional comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**ADVANTAGES AND SERVICES TO MEMBERS**

- The opportunity to share and network with other non-profit organizations.
- Volunteer recruitment through our website, office listing and weekly newspaper advertisements.
- Mutual support with O.V.A. and other Members to reach our shared common goals of community development.
- Sharing of resource material and ideas from Volunteer Canada, Volunteer BC and Canadian Centre for Philanthropy.
- Display your brochures and posters in the O.V.A. office.
- Members are considered first for special events such as our Volunteer Appreciation Luncheon.
- Monthly Members Meeting.
- Access to reference materials.
- Listing in our website Member Directory.
- Active recruitment of volunteers to fill immediate needs.