



Ohio Alliance to End Sexual Violence

## **2020 Membership Application**

**Please return this application with your  
payment by March 15, 2020.**

6111 Oak Tree Blvd., Suite 140

Independence, Ohio 44131

P: (216) 658-1381

[www.oaesv.org](http://www.oaesv.org)

## Membership Benefits

**The Ohio Alliance to End Sexual Violence is fighting for your communities, your friends, your family members, your co-workers, and your rights by advocating for more equitable policies related to sexual violence prevention, awareness, and survivors' rights here in Ohio. We're committed to:**

- Expanding rape crisis services.
- Advocating for policies that affect lasting change.
- Empowering campuses to prevent sexual violence.

By joining us and working together you can help us achieve even more.

**Our Members are leading the way towards eliminating sexual violence in Ohio and beyond.**

OAESV is a membership-based organization that relies on the support of organizations and individuals throughout Ohio. Additionally, OAESV provides the critical component of building bridges of collaboration between direct service providers and allies in order to strengthen the collective voices of those working together toward our shared goal of eliminating sexual violence in Ohio.

- Annual membership is open to public and private organizations, government entities, and individuals.
- OAESV strives for a broad, diverse, and multi-disciplinary membership.
- Member information will not be shared with third parties.

### **Benefits for All Members**

- Free registration for best-practice advocate, prevention, legal, and social equity trainings
- Access to digital and print resources via the Member Portal on our website as well as the Resource Library
- Sexual Assault Awareness Month packet and materials sent directly to you
- Legislative alerts and notification of special events
- Free or reduced CEU's at trainings, including the Annual Statewide Conference
- Voice on public policy issues affecting Ohio
- With your permission only, your name listed on the membership list on our website

# Membership Levels & Dues

## Individuals and Students

Stand together with the many Ohioans across the state to end sexual violence. Members receive monthly email updates as well as alerts and access to digital and printed resources.

**Individual Member: Just \$50/year**

**Student\*: Just \$25/year**

**Law Student\*: Free!**

\*Students must submit school of attendance and graduation date.

## Affiliate Organizations

Keep your corporation, non-profit organization, government agency, private practice, or other related agency in the loop on OAESV's progress, best-practice guidance, and opportunities for social action. We are a great resource for Forensic and Sexual Assault Nurse Examiner units, hospitals, law enforcement agencies, mental health agencies, other victim-service agencies, and campuses.

**Annual budget <\$100,000: \$125 / year**

**Annual budget >\$100,000: \$225 / year**

## Additional Benefits

- Electronic logo and tagline for your website to display OAESV membership in addition to Certificate of Membership
- Participation in membership committee meetings and working groups of the coalition, including Public Policy Committee, Women of Color Caucus, LGBTQI Task Force, and Abilities Task Force

## Rape Crisis Programs

This membership level is open to rape crisis programs in Ohio that meet the core standards developed by OAESV. Membership at this level goes through the Membership Committee review and approval process.

**An invoice has been included in packets for rape crisis programs according to the following dues schedule:**

## Additional Benefits

- Full voting privileges
- Training and technical assistance tailored to your specific needs, including prevention work
- Opportunities for rape crisis center members to run for a two-year term as a Regional Leader in one of five Ohio regions
- Customized campaign materials for Sexual Assault Awareness Month 2020 for Rape Crisis Centers
- Networking and support at regional meetings and quarterly program director meetings
- Access to legal assistance for survivors you serve
- Site visits by OAESV and your peers, aimed at strengthening your services

**Annual budget <\$50,000:**

\$100/year

**Annual budget \$50,000-\$100,000:**

\$175/year

**Annual budget \$100,000-\$300,000:**

\$350/year

**Annual budget \$300,000-\$500,000:**

\$500/year

**Annual budget > \$500,000:**

\$600/year

## The Membership Process

To apply or renew your membership with OAESV, please fill out pages 6 and 7. Ensure that your executive director and board president (where applicable) sign the application; if you're an individual, please sign on the "Individual Member" line. Then, return along with your membership dues by March 15, 2020.

Membership application information may be submitted electronically or by hard copy, whichever is easier.

We are happy to provide support and technical assistance during your application or renewal process. Please call our resource line at (888) 886-8388 or email us at [info@oaesv.org](mailto:info@oaesv.org).

### Directions on Completing Application

#### Digital Submission

This is a fillable pdf file, which allows you to type the answers directly into the digital document.

1. Save this file to your computer
2. Fill in the blanks by typing your answers on pages 6 and 7.
3. Save the file again and attach in an email to [info@oaesv.org](mailto:info@oaesv.org). Please type "Membership Application 2020" in the subject line.
4. Submit your payment by check or online payment (directions on the following page).

Alternatively, you can follow [this link](#) to submit your application via Constant Contact.

1. Follow the link and fill in the answers.
2. Click "continue."
3. Submit payment via PayPal page that appears, or mail a check to the address on the next page. Please be sure to pay the amount that corresponds to your organization's annual budget, if applicable.

#### Hard-Copy Submission

1. Save this file and fill in the information using Adobe Acrobat; or, save this file, print, and then fill out by hand.
2. Print pages 6 and 7 and mail with your payment to:  
ATTN: Membership 2020  
Ohio Alliance to End Sexual Violence  
6111 Oak Tree Blvd., Suite 140  
Independence, Ohio 44131

## **Submitting Payments**

Membership dues can be made online or by check by March 15, 2020.

### **Pay Online**

To access our online payment portal, go to [www.oaesv.org/donate](http://www.oaesv.org/donate), click the “Membership 2020” graphic, and, on the PayPal page, choose the dropdown menu item that matches the invoice included in your membership packet, when applicable. If you are an individual or affiliate member, choose the dropdown menu item that matches your membership type and annual budget category.

You can also scan this QR code using a QR code reader app on your smartphone:



### **Pay by Check**

Mail your payment to:

ATTN: Membership 2020  
Ohio Alliance to End Sexual Violence  
6111 Oak Tree Blvd., Suite 140  
Independence, Ohio 44131



## **2020 Program Membership Application**

Please use this application to submit your contact information. If you're a 2019 member and are renewing your membership, you should still submit this form in order to ensure that we have the most up-to-date information.

By signing this form, you are indicating that you support our mission & vision and, if you're a rape crisis program, that you are committed to the Core Standards for Rape Crisis Programs in Ohio. These can be found on our website at: [oaesv.org/corestandards](http://oaesv.org/corestandards).

Date: \_\_\_\_\_

Name of Individual, Organization, or Program: \_\_\_\_\_

Contact Person Name: \_\_\_\_\_

Contact Title: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Organization mailing address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

24/hr Crisis Phone: \_\_\_\_\_

Organization or Program Website: \_\_\_\_\_

Organization General Email Address: \_\_\_\_\_

Counties/Area of Service: \_\_\_\_\_

Year Incorporated: \_\_\_\_\_

Are you a dual agency, providing sexual violence and domestic violence services? Y or N

\_\_\_\_\_  
Board President Signature

\_\_\_\_\_  
Executive Director Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Individual Member Signature

\_\_\_\_\_  
Date Signed

*The contact person listed on this form will be placed on the 2020 Member Contact email list and will receive information on our resources, trainings, public policy announcements, and more. If other staff at your organization wish to be on this email list, please have them email [communications@oaesv.org](mailto:communications@oaesv.org).*

Please note that OAESV member status does not guarantee funding from any source.