

Member Profile

Name:

Title:

Organization/Agency name:

Mailing Address:

City:

State/Province:

Zip/Postal Code:

Country:

Telephone:

Fax:

Email:

As a service to members VOMA will provide the following information in the membership directory and on the website. Please indicate here if you do not want this information shared

Please check all appropriate boxes:

<p>Areas of Practice:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Victim advocacy <input type="checkbox"/> Offender Advocacy <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Serious and Violent Crime <input type="checkbox"/> Court Annexed <input type="checkbox"/> Reintegration <input type="checkbox"/> Community <input type="checkbox"/> Faith-based <input type="checkbox"/> Schools/Universities <input type="checkbox"/> Youth <input type="checkbox"/> Cross-cultural <input type="checkbox"/> Environmental/public policy <input type="checkbox"/> Family <input type="checkbox"/> Indigineous peoples <input type="checkbox"/> specify: <input type="checkbox"/> Schools and Youth <input type="checkbox"/> Training and Teaching 	<p>Areas of Interest:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Community <input type="checkbox"/> Restorative Justice (work with victims, offenders, and communities) <input type="checkbox"/> Environmental/ Public Policy <input type="checkbox"/> Workplace/ Organizational <input type="checkbox"/> Research <input type="checkbox"/> Other 	<p>Organizational Setting:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Court based <input type="checkbox"/> Government <input type="checkbox"/> Community based <input type="checkbox"/> Educational <input type="checkbox"/> Non-profit <input type="checkbox"/> Law office <input type="checkbox"/> Private practice <input type="checkbox"/> Faith-based <input type="checkbox"/> Human Rights <input type="checkbox"/> Insurance <input type="checkbox"/> Organizational/Workplace <input type="checkbox"/> Commercial
<p>Clients:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Victims <input type="checkbox"/> Young offenders <input type="checkbox"/> Adult Offenders <input type="checkbox"/> Community Members <input type="checkbox"/> Other 	<p>Type of Practice:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Mediation <input type="checkbox"/> Peer Mediation <input type="checkbox"/> Conferencing <input type="checkbox"/> Circles <input type="checkbox"/> Facilitation <input type="checkbox"/> Training <input type="checkbox"/> Education <input type="checkbox"/> Other 	<p>Language: Services offered in</p> <ul style="list-style-type: none"> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> French <input type="checkbox"/> Other

I am interested in volunteering or working on these issues:

- Board Committee
- VOMA newsletter
- Website
- Conference
- Book reviews
- Membership
- Training
- Fundraising
- Videos/other resources

Part of VOMA's mission is to increase the diversity of its membership. It would help us achieve success with this goal if you provide the following information (Optional):

I am a member of an equity seeking group (please specify):

- Gender
- Race/ethnicity
- Gay/Lesbian/Bi-sexual/Transgender
- Faith-based
- Disability