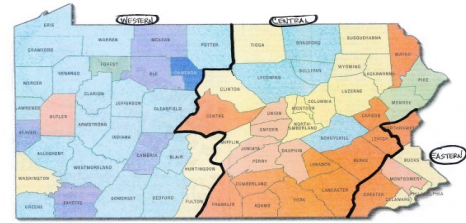




PAHVRP

Pennsylvania Association for Healthcare Volunteer Resource Professionals



The **Pennsylvania Association for Healthcare Volunteer Resource Professionals (PAHVRP)** is comprised of directors, managers, coordinators and others who direct or mobilize volunteers in Pennsylvania health care settings such as hospitals, VA hospitals, hospices, long-term care facilities with non-profit agencies. There are three (3) regions of PAHVRP: Eastern, Central, and Western (see map above). Members can attend meetings in any location throughout the year. PAHVRP is a member/chapter of the Association for Healthcare Volunteer Resource Professionals (AHVRP) which is a division of American Hospital Association (AHA).

BENEFITS OF MEMBERSHIP

1. Answers to questions about ever-changing state and national regulations and procedures required of healthcare providers and the role of the Volunteer Services Department within the organization.
2. Problem solving to improve and revitalize the selection, orientation, and training of volunteers.
3. New ideas for volunteer programs, materials, and events.
4. Networking opportunities with members who are dealing with similar problems, situations and identifying solutions.
5. Professional Development — sessions held at quarterly meetings throughout the state and at conferences that feature world-class presenters and interactions with colleagues from around the state and nearby states.
6. Website containing useful resources, member directory as well as answers to members' questions including an opportunity to post requests for answers to specific questions and situations one is dealing with in their facility.

Please type your information in the fields below before printing and include a copy with your check.

2018 MEMBERSHIP FORM — The Pennsylvania Association for Healthcare Volunteer Resource Professionals (PAHVRP)

Name _____ Title _____

Facility _____

Mailing Address _____

Work Phone: _____ Cell: _____ Fax: _____

Email: _____

Name of Supervisor: _____ Supervisor's email: _____

Location (if different from you) _____

_____ **NEW member** Referred by: _____

_____ **Renewing* member** _____ Yes, you may use my photograph on web/ in directory

Are you a member of AHVRP? _____ Yes _____ No CAVS designation? _____ Yes _____ No

CVA designation? _____ Yes _____ No

Region you belong to: _____ Western _____ Central _____ Eastern

***MEMBERSHIP RATES:**

1 - 3 members = \$80.00 per member

4 - 6 members = \$70.00 per member

more than 7 members = \$60 per member

Checks due by March 1, 2018 and should be made payable to PAHVRP and forwarded (with a copy of this page indicating who the check is for) to:

PAHVRP
c/o WellSpan Health
Christi Brown, Volunteer Engagement
1001 South George Street
York, PA 17403

2018 Regional Meeting Information

Regional meetings are held quarterly. Members will be notified via email once dates, locations and topics are scheduled.

WEBSITE: www.psdvs.memberlodge.org