



BUSINESS VOLUNTEER COUNCIL
BVC Membership Form

Date: _____

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____

WBVC Representative Name & Title: _____

Phone Number: _____ E-mail: _____

WBVC Designated Alternate Representative: _____

Phone Number: _____ E-mail: _____

Do you currently have an Employee Volunteer Program? _____

What percentage of your employees participate? _____

Annual Dues Per Company - Please check number of employees

- 1-50 employees (\$50 per year) 51-100 employees (\$100 per year)
 101-500 employees (\$200 per year) 500-1000 employees (\$300 per year)
 > 1000 employees (\$400 per year)

Checks should be made payable to: The Volunteer Center of United Way

**Please mail check and form to:
The Volunteer Center of United Way
Attn: Norman Fulton – Manager, Corporate Programs
Address: 280 N. Central Avenue, Suite 310
Hartsdale, NY 10530**

The Volunteer Center of United Way is a 501(c)(3) nonprofit organization - Tax ID 13-6165593

Questions? Please call or email Norman Fulton at 227-9311 - Norman@volunteer-center.org