

2014/2015 GNESA Membership Renewal Form

GNESA defines sexual violence as:

"A socially tolerated, pervasive sex crime of power and control used to humiliate, devalue, and objectify a person."

Vision

To lead Georgia to a society free of sexual violence.

Mission

As the recognized authority and in participation with others, GNESA builds statewide capacity to end sexual violence by raising awareness and creating social change.

GNESA's Core Values:

- 1. We oppose the use of all forms of violence. We affirm the basic human right of every person to live without fear or the threat of sexual violence.
- 2. We understand that historically women have been and are the primary victims of sexual violence as a result of patriarchal cultural values that have either expressly sanctioned or implicitly tolerated objectification and sexual exploitation of women.
- 3. We stand in solidarity with efforts around the world to end all forms of sexual violation, discrimination, exploitation and violence against women.
- 4. We recognize that sexual violence is perpetuated by forms of oppression based on race, gender, class, ethnicity, nationality, disability, age, religion and sexual orientation created by a climate of supremacy and ownership.
- 5. We believe in the strength of diversity, embrace the differences among ourselves, and cultivate diverse leadership.
- 6. We undertake prevention efforts to confront and change cultural norms and practices that condone sexual violence.
- 7. We promote and encourage victim/survivors' leadership in guiding our advocacy and social change efforts. We affirm the power of our collective and collaborative efforts, to advocate with social systems and institutions in order to end sexual violence.
- 8. We commit to create a work environment for staff, volunteers and collaborative partners that respects diversity, fosters professional growth, encourages critical thinking and initiative and promotes diligent and effective advocacy efforts.
- 9. We believe that all survivors have the right to advocacy that supports their selfdetermination regarding lifestyles, finances, education, employment, sexual and reproductive matters, and responses to the sexual violence in their lives.
- 10. We believe it is the community's responsibility to recognize sexual violence as an epidemic and to insist our laws and criminal justice system hold perpetrators accountable.
- 11. We encourage reflection about our work and thoughtful evaluation of our efforts. We are committed to the ongoing development of innovative strategies and programs to better meet the diverse and emerging needs of survivors.
- 12. We support and honor a survivor's right to confidentiality and uphold the federal confidentiality guidelines.

2014/2015 Membership Dues

*Annual Membership Dues for Sexual Assault Programs/Centers: \$200

*Annual Membership Dues for Individuals, Supporting Organizations and Non-Profits: \$50

2014/2015 Membership Benefits Include:

o Listing for job openings on GNESA website

o April sexual assault awareness month materials to support your local campaign

o E-mail blasts on news, resources & funding opportunities

o Updated Information and research on sexual assault

o Free GNESA printed materials

- o Onsite GNESA sponsored trainings at your center or organization
- o Reduced registration fee for GNESA sponsored trainings
- o E-mail, telephone and on-site technical assistance
- o License to use GNESA logo on your materials
- o Finanical Assistance for attendance at annual National Sexual Assault Conference (if funding is available)

_____ Yes, I would like to become a new or renewing member of GNESA

as a sexual assault program/center. I have enclosed a check for \$200 or processed my payment via PayPal (kellington@gnesa.org).

_____Yes, I would like to become a new or renewing member of GNESA as an individual supporting organization and/or non-profit. I have enclosed a check for \$50 or processed my payment via PayPal (kellington@gnesa.org).

_____ No, I do not wish for my program to be a member of GNESA at this time.

_____ I would like to make a donation to GNESA to support continuing efforts to end sexual violence in the amount of \$ ______. I have enclosed a check for this amount or processed this payment via PayPal (kellington@gnesa.org).

Signature

Date

Name/ Title

Program Name

* annual membership is from October 1, 2014 thru September 30, 2015

GNESA 2014/2015 Membership Form

Please complete all sections and return along with page 3 only and your payment (if applicable) to GNESA:

Organization/Program or Individual Name		
Director		
Mailing Address		
City	StateZ	ip
Business Phone	Crisis Phone	
Fax	E-mail	
Organization Web Site		
Name & Title of Primary Cont	act (if not Director)	
Counties/Areas of Service		
Type of Program SAC	_SA/DV ProgramCAC	_Other
agency provides and the clien		
	with your payment via one of th	
<u>US Mail</u> GNESA	Email	Fax
817 West Peachtree Street Suite 200 Atlanta, GA 30308	<u>kellington@gnesa.org</u>	404-815-5265

You may contact Krista at GNESA with any questions at 404-815-5261. Thank you for your support.