



**2015/2016
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, GNESEA 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 self-determination 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.

2015/2016 Membership Dues

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

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

2015/2016 Membership Benefits Include:

- o Listing for job openings on GNESEA 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 GNESEA printed materials
- o Onsite/Local GNESEA sponsored trainings at your center, organization or in your community
- o Reduced registration fee for GNESEA sponsored trainings
- o E-mail, telephone and on-site technical assistance
- o License to use GNESEA logo on your materials
- o Financial 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 GNESEA 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 GNESEA 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 GNESEA at this time.

____ I would like to make a donation to GNESEA 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, 2015 thru September 30, 2016

GNESA 2015/2016 Membership Form

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

Organization/Program or Individual Name _____

Director _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

Business Phone _____ **Crisis Phone** _____

Fax _____ **E-mail** _____

Organization Web Site _____

Name & Title of Primary Contact (if not Director) _____

Counties/Areas of Service _____

Type of Program ___ SAC ___ SA/DV Program ___ CAC ___ Other

If you are a supporting organization or non-profit, please describe the services your agency provides and the clients you serve:

Please return to GNEA along with your payment via one of the methods below:

Email

kellington@gnesa.org

Fax

404-815-5265

US Mail

GNESA
P O Box 162505
Atlanta, GA 30321

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