

#### Membership Packet

The Butler Collaborative for Families (BCF) is a membership organization with a mission to build a unified and integrated network of services by using a multi-agency approach to break down barriers and strengthen the system of care for individuals and families of Butler County, PA. Comprised of agencies, faith-based institutions, businesses, and passionate community members around Butler County, the BCF actualizes this mission by:

- Providing Networking Opportunities: To develop and enhance communication and collaboration among businesses, the criminal justice system, faith-based organizations, education, social service agencies, and the community.
- Functioning as an Incubator: To provide opportunities and support for new ideas
  and programs that will enhance the community. Identify the needs of children,
  adolescents, adults, and families, and support initiatives that strengthen existing
  efforts and/or provide new opportunities.
- Mobilizing Resources: To leverage human and financial resources to support identified needs.

This community of providers and partners has a lot to offer! From engaging monthly meetings and social events, to actionable sub-committees and partnering collaboratives with specific areas of focus, there are many opportunities to give and grow both personally and professionally. And it is your engagement that benefits this collaborative movement the most, because we know that we can do more and do better for our communities when we are doing it together. See who is a part of the BCF by visiting <a href="https://www.butlerfamilies.com/membership">www.butlerfamilies.com/membership</a>

Renewing, returning, and new members alike are asked to complete the following membership packet in its entirety, and renewing members will have until January 31st, 2024 to complete their membership renewal before all associated perks of membership are suspended. Membership will be considered completed when all forms have been received and payment has been processed. Questions regarding membership can be submitted to bcfcoordinator@gmail.com.



# Membership Invoice

### Period January 1, 2024 through December 31, 2024

INDIVIDUAL OR ORGANIZATION			/IDUAL OR ANIZATION		
NAME:		ADDI	RESS:		
2023 Membership Tiers					
	Community Member At Large (no cost)	Individual Professional Membership \$25.00	Business Membership \$50.00	House Of Worship \$75.00	Human Services/ Non-profit Agency Membership \$150.00
Monthly networking opportunities through General Membership Meeting or other BCF Sponsored Events	Х	Х	х	Х	Х
Ability to be nominated for and serve on the BCF Executive Committee	Х	Х	Х	X	Х
Voting privileges in BCF elections and BCF initiatives (Gap analysis, mini-grant selection, etc.)		Х	Х	Х	Х
Access to shared resources, and professional coaching and support		Х	X	Х	X
*Discount* on all BCF sponsored trainings  *Discount is not a fixed rate and is subject to change based on training		X non-transferable and specific to paid member only	X Discount applicable up to 5 employees of member business	X Discount applicable up to 5 staff or volunteers of member House of Worship	X Discount applicable up to 10 employees or volunteers of member agency
Access to discounts/rebates from participating business members		Х	Х	Х	X
Ability to promote initiatives, trainings, or programs at monthly meetings or other BCF events.			Х	X	Х
Free table at all BCF sponsored resource fairs or events			Х	Х	X
Ability to promote initiatives, trainings, programs or business information via bimonthly e-newsletter, social media or other BCF sponsored events.			Х	Х	Х
Membership listing on Membership Page of BCF Website to include live link to member website.			Х	X	Х
Ability to apply as the lead applicant for BCF Mini-grants				Х	Х

PLEASE MAKE CHECK PAYABLE TO:	Butler Collaborative for Families (Memo line: BCF Membership)			
	Monarch Place – C/O BCF Coordinator			
SUBMIT CHECK AND MEMBERSHIP FORMS TO:	100 Brugh Avenue			
	Butler, PA 16001			
MEMBERSHIP TYPE:	AMOUNT DUE: \$			



#### Membership Contact List

As a membership organization, the Butler Collaborative for Families wants to ensure that communication to and for our membership is current and accurate. Please complete the following fields so we may update our records. Please note: it is the responsibility of the individual membership to ensure that changes in agency representatives (if applicable) and contact information is updated throughout the calendar year. Changes can be submitted to <a href="mailto:bcfcoordinator@gmail.com">bcfcoordinator@gmail.com</a>.

Community and Individual Professional Members are only asked to fill out the Membership Type and Point of Contact fields. Human Services/Non-profit Agencies, Houses of Worship, and Business Members may complete the Additional Contact fields and also specify a website link that will be applied to their name on the Membership Page of the BCF website: <a href="https://www.butlerfamilies.com">www.butlerfamilies.com</a>.

Membership Type:					
Agency/Organization Name and Address (If Applicable):					
Agency/Orga	nization Website Link (	If Applicable):			
Contact Type	Name (First, Last)	Position	E-mail	Phone	Register for Newsletter (Y/N)
Executive Director (If Applicable)					
Billing Contact (If Applicable)					
Primary Point of Contact					
Additional Contact					



# **Collaborative Agreement**

The overall purpose of this agreement is to enable agencies, schools, government, community leaders and community members to establish working relationships that will inform and enhance countywide goals to improve the lives of individuals, children, and families across the lifespan in Butler County.

This Memorandum of Understanding is developed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_ in order to clarify the commitments made by the participant of the Butler Collaborative for Families in order to achieve the following:

- Regularly assess community needs and resources / assets
- Develop a local action plan, with annual updates, which identifies goals and priorities for individuals and families and outlines strategies for meeting community needs
- Recommend priorities in the application of public and private funds geared towards improved outcomes for individuals and families
- Actively pursue funding to support initiatives
- Mobilize community agencies, organizations, and residents to offer prevention services that are needed but not available
- Advocate on behalf of individuals and families to improve access to services
- Facilitate collaboration and information sharing among the education, child development, health, human/social services, family support/prevention, industry, religious and other systems
- Promote education and understanding designed to shift thinking from a treatment or rehabilitation focus to a prevention and skills acquisition focus
- Actively engage in activities designed to build and/or strengthen the community's capacity to serve individuals and families across the lifespan
- Evaluate the effectiveness of existing services and evaluate the effectiveness of the BCF
- Promote community awareness of the needs and issues effecting individuals, children, and families in Butler County, and emphasize community strengths in supporting these populations



# Collaborative Agreement

The Undersigned agrees to the following:

- 1. To utilize the BCF as a community-based organization which brings all interested parties together to achieve the above noted tasks/functions
- 2. To provide to the BCF, and share with one another, any data which might be useful and necessary in pursuing the above stated functions. It is understood that confidential information as defined in individual agency policy shall not be shared
- 3. To participate in joint planning activities and use the BCF whenever possible to meet program or agency specific planning/collaboration requirements
- 4. To maintain active membership by attending meetings.
- 5. To actively participate on at least one Standing Committee of the BCF.
- 6. Submit changes in organization representatives to the BCF Coordinator.
- 7. Ensure agency program information is up-to-date with community information and referral programs, such as PA 211 Southwest for the benefit of the community.

I have read, understood, and agree with thes	se terms and conditions.
Member Signature	Date
Organization (if Applicable)	
*****Please be aware that at BCF functions/momay be used on our website and/or facebook your agency members picture used in any cabelow.	page. If you do not want to have you or
Opt out Individual/Organization_	
Signature	Date