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| **Chapter Name**  | Cascadia (covering Oregon and SW Washington |
| **Chapter Number (ex. CH0000)**  | CH8029 |
| **Chapter Location (City, State)**  | Portland, Oregon |
| **Chapter Membership Size**  | Large (350+) |
| **Contact Person for this Submission:**  | Kathleen Bergquist |
| **Email Address:**  | info@tdcascadia.org |
| **Phone Number:**  | (503) - 579 - 1552 |
| **Chapter Board Position:**  | Executive Director |
| **Chapter Website URL:**  | [https://ww.tdcascadia.org](http://enotification.td.org/track/click/30530608/ww.tdcascadia.org?p=eyJzIjoib1BhcXN2VEQ0aEJ4TjNuajdsaTh1MTIwNFlJIiwidiI6MSwicCI6IntcInVcIjozMDUzMDYwOCxcInZcIjoxLFwidXJsXCI6XCJodHRwczpcXFwvXFxcL3d3LnRkY2FzY2FkaWEub3JnXCIsXCJpZFwiOlwiMjdkMGYwZmFmZjJlNDEzZGJhYWJjYzY3ODkzYjFjYjZcIixcInVybF9pZHNcIjpbXCJmYjcxODhkYTRmZWI5YjQwNzk3NTA1NWVjOWZlZDU0YmM4MGRkMTI3XCJdfSJ9) |
| **Submission Title:**  | Membership Cards |
| **Submission Description:**  | Process to send out membership cards to new members monthly. |
| **Need(s) Addressed? Please be specific.**  | High touch with new members. Even though members get an email welcoming them to the chapter, we felt that adding a personal touch was a good addition. |
| **What is your chapter's mission?**  | Empower professionals to develop talent in the workplace |
| **How does this effort align with your chapter's mission (Please provide specific examples)?**  | Anything related to helping TD professionals feel more a part of the organization provides them with a community and connection. |
| **National ATD's mission is to "empower professionals to develop talent in the workplace". How does this submission align with ATD's mission? Please provide specific examples.**  | See above. |
| **Target Audience: (Who will benefit/has benefited from this effort?)**  | All new members and renewing members as we cycle through the membership year. |
| **Costs/Resources Used: (include any details regarding use of resources including monetary, donations, contributions, volunteer hours, people resources, etc. and how you went about getting these resources)**  | Provided in Word document. |
| **How did you implement: (please give a brief description)**  | On a monthly basis. |
| **What were the Outcomes: (Please include hard data regarding financial gains, membership increases, target audience satisfaction levels, publicity for the chapter or for the profession, etc.)**  | No hard data yet as we just implemented this process. We'll ask for data after an appropriate period of time. |
| **Lessons Learned: (hints and tips for other chapters who may be considering a similar effort)**  | Keeping the costs down (direct costs and staff / volunteer costs) will be the key. |
| **Please list the specific ATD chapter resources that helped guide you in the process of completing this best practice (e.g. people, documents, policies, by-laws, etc.):**  | The board developed basic ideas and the ED developed the cost, processes, and obtained the volunteer to design the membership cards. National ATD's process was also reviewed. |
| **Please attach any documents that help support this submission: (additional documents should be sent to** SOS@td.org**)**  |  [ATD 2016 Membership Notecard - Cost Info.docx](http://enotification.td.org/track/click/30530608/forms.td.org?p=eyJzIjoiS0o1cXRRVTQxSmhGM3hXODlWN3FlcnltazQ4IiwidiI6MSwicCI6IntcInVcIjozMDUzMDYwOCxcInZcIjoxLFwidXJsXCI6XCJodHRwczpcXFwvXFxcL2Zvcm1zLnRkLm9yZ1xcXFxcXFwvZG93bmxvYWQucGhwP3E9Wm05eWJWOXBaRDB4TVNacFpEMDVNU1psYkQxbGJHVnRaVzUwWHpFMlwiLFwiaWRcIjpcIjI3ZDBmMGZhZmYyZTQxM2RiYWFiY2M2Nzg5M2IxY2I2XCIsXCJ1cmxfaWRzXCI6W1wiMmE3ZDAzMjQ0YTlmMGMyOTcyMDE4ZmM5NzFhYTdiNzRkOTMyN2ZhN1wiXX0ifQ) |
| **additional supporting documents:**  |  [ATD 2016 Membership Notecard - Inside Notecard Flap.docx](http://enotification.td.org/track/click/30530608/forms.td.org?p=eyJzIjoiSVFacGJwVHFNUjMyV29KVnhlQ0Q3Zk40QVFvIiwidiI6MSwicCI6IntcInVcIjozMDUzMDYwOCxcInZcIjoxLFwidXJsXCI6XCJodHRwczpcXFwvXFxcL2Zvcm1zLnRkLm9yZ1xcXFxcXFwvZG93bmxvYWQucGhwP3E9Wm05eWJWOXBaRDB4TVNacFpEMDVNU1psYkQxbGJHVnRaVzUwWHpJeVwiLFwiaWRcIjpcIjI3ZDBmMGZhZmYyZTQxM2RiYWFiY2M2Nzg5M2IxY2I2XCIsXCJ1cmxfaWRzXCI6W1wiMmE3ZDAzMjQ0YTlmMGMyOTcyMDE4ZmM5NzFhYTdiNzRkOTMyN2ZhN1wiXX0ifQ) |
| **additional supporting documents:**  |  [ATD 2016 Membership Notecard - Membership Card.docx](http://enotification.td.org/track/click/30530608/forms.td.org?p=eyJzIjoiMjQtYndfT3I5eDlCNU5wSzhrdXoySjg4RGo0IiwidiI6MSwicCI6IntcInVcIjozMDUzMDYwOCxcInZcIjoxLFwidXJsXCI6XCJodHRwczpcXFwvXFxcL2Zvcm1zLnRkLm9yZ1xcXFxcXFwvZG93bmxvYWQucGhwP3E9Wm05eWJWOXBaRDB4TVNacFpEMDVNU1psYkQxbGJHVnRaVzUwWHpJelwiLFwiaWRcIjpcIjI3ZDBmMGZhZmYyZTQxM2RiYWFiY2M2Nzg5M2IxY2I2XCIsXCJ1cmxfaWRzXCI6W1wiMmE3ZDAzMjQ0YTlmMGMyOTcyMDE4ZmM5NzFhYTdiNzRkOTMyN2ZhN1wiXX0ifQ) |
| **How did you become familiar with the Sharing Our Success (SOS) program?**  | Other |
| **If you selected "other", please explain your response.**  | As a Chapter leader, already familiar with SOS and have submitted vefore. |
| **Would you be willing to present on this submission at the ATD Chapter Leaders Conference (ALC)? \*Participating chapters receive up to two complimentary registrations for presenters.**  | Yes |

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