

# NAHCR Membership Application

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

## Dues Category

- Active Membership \$135 **(additional members from the same facility \$99/each)**  
Active members are recruiters or human resource professionals in any organization providing direct health care, such as a hospital, long term care, home health, military, HMO.
- Federal Government Membership \$99  
Federal Government members are recruiters or human resource professionals in any organization owned and operated by the Federal Government, such as a VA Hospital
- Associate Membership \$185  
Associate member are individuals who are not doing actual recruiting but want to support the work of health care recruiters.
- Institutional Membership \$1,100  
Institutional members are companies interested in supporting NAHCR and who provide services or products of interest to recruiters such as advertising agency, temporary or staffing agency, publications, travel agency, applicant tracking.

**Search firms are NOT eligible for NAHCR membership.**

## Active Membership

**Recruit for:**  Allied Health  HMO  Home Care  Long-Term Care  Nurse  Physician

**Employment Setting:**  Home Health  Hospital/Health System  Rehab  Long-Term Care  
 Sub-Acute Care  Other (please specify) \_\_\_\_\_

**Reports to:**  Human Resources  Nursing  Other (please specify) \_\_\_\_\_

**NAHCR Region:**  Northeastern  North Central  Southern  Western

## Payment

Amount of Dues: \$ \_\_\_\_\_

- Check Attached  
Please make checks payable to NAHCR, 2501 Aerial Center Parkway Ste. 103, Morrisville, NC 27560

Charge to Credit Card:  MasterCard  Visa  American Express  Discover

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_