

ASSOCIATE CORPORATE MEMBERSHIP APPLICATION



Application is hereby made for associate membership in the Hospital Association of Southern California. Applicant agrees to abide by the bylaws and all rules and regulations.

Organization name

Organization website

Standard Industrial Classification (SIC) Code

Mailing street address, city, state and zip

Organization phone

Applicant's name

Business card title

Applicant's phone

Applicant's email

Business Description

Business References (Required: two references from current HASC member hospitals and systems.)

Name

Title

Organization name

Street address, city, state and zip

Phone

Email

Name

Title

Organization name

Street address, city, state and zip

Phone

Email

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Directory Information

1.	_____	_____	_____
	<i>Name of CEO</i>	<i>Title</i>	<i>Email</i>
2.	_____	_____	_____
	<i>Primary Contact, Southern CA</i>	<i>Title</i>	<i>Email</i>
3.	_____	_____	_____
	<i>Name</i>	<i>Title</i>	<i>Email</i>
4.	_____	_____	_____
	<i>Name</i>	<i>Title</i>	<i>Email</i>

Please provide high-quality logo of organization with this application.

Application Process

Applications for associate membership are subject to review by the Executive Committee, which may request additional information or material. Applicants will be notified of membership effective date. Completed membership application forms should be emailed to membership_services@hasc.org.

The purpose of associate membership is to serve organizations doing business with HASC member hospitals. Benefits shall include information services and networking opportunities. **The granting of an associate membership does not in any way constitute or imply HASC's endorsement of services or products.** Use of the HASC logos or any statements of endorsement without HASC consent shall result in loss of membership and possible legal action.

Associate membership is limited to companies not eligible for organizational or related membership.

Annual Membership Dues

Dues for associate corporate membership in HASC become payable upon approval for membership:

Individual	\$1,000	Small firms of one to three professionals serving health care clients.
Corporate/ Consulting Firms	\$2,000	Firms of four or more professionals (law, executive search, consulting and other firms) serving health care clients.
Corporate/ Health Care Supplier	\$3,000	Information systems, technological services, equipment manufacturing and pharmaceutical companies and other suppliers.

CONTACT

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Membership Services
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