

Personal Information, *required information

Mr. Ms. Dr. Other

*NAME

*MAILING ADDRESS LINE 1

*ADDRESS LINE 2

*CITY STATE ZIP

*This mailing address is my: HOME BUSINESS

*TELEPHONE

*EMAIL (your EMAIL will also be your USERNAME when signing into your HFMA Account)

Exclude me from the online HFMA Membership Directory
Exclude me from lists provided to outside organizations

Job Level

President/CEO/Executive Director
Partner, Principal or Owner
CFO/Controller
Other Chief Officer Excluding CFO
Vice President
Assistant/Associate Vice President Excluding CFO
Director/Manager/Supervisor
Clinical/Physician
Clinical/Non-Physician
Staff Specialist or Professional (Analyst/Accountant/Consultant)
Professor/Academic

Organization Type

Health System/Hospital
Physician Practice/Clinic
Health Plan

Business Partner
Other - please specify:

Chapter Affiliation

Indicate preferred chapter affiliation.†

Sponsor Name

Sponsor is not required for membership.

Membership Dues

Membership
(1 year membership dues)

Individual Membership

Healthcare business leaders, including finance professionals and business partners.

\$ 335

New to HFMA Individual Membership

First-year introductory rate for healthcare business leaders, including finance professionals and business partners.

\$ 285

New to HFMA Physician and Other Clinician Membership

First-year introductory rate for physicians and other clinician as well as medical group or clinic personnel.

\$ 105

New to HFMA Health Plan Membership

First-year introductory rate for health plan leaders.

\$ 105

Faculty Membership

Full-time faculty teaching finance, healthcare administration, or medicine in an accredited college or university.

\$ 105

Retired Membership

Members in good standing who are transitioning to retirement and have been with HFMA for at least 5 years.

\$ 40

Student e-Membership

Students currently enrolled full time in an accredited undergraduate or graduate program.

\$ 0

*Required Information. **Optional.

HFMA Forums**

hfma.org/forums

Each Forum \$110 or join all Forums for \$220

CFO
Legal & Regulatory
Payment & Reimbursement
Revenue Cycle
All Forums

HFMA Newsletters**

hfma.org/newsletters

Healthcare Cost
Containment, \$120
Revenue Cycle Strategist, \$130
Strategic Financial Planning, \$165

Total: \$

Total = membership dues + optional newsletters and forums

Payment Information:

Check Enclosed (Payable to HFMA)
Visa MasterCard Discover AMEX

CARD NUMBER

CARDHOLDER'S NAME

CARDHOLDER'S SIGNATURE

EXPIRATION DATE CVV CODE

Affirmation

I affirm that the information I have given is true to the best of my knowledge, and I agree to abide by the HFMA Code of Ethics and the Constitution and Bylaws of the Association. To read the HFMA Code of Ethics go to hfma.org/code.

SIGNATURE

DATE

† Note: If a member does not provide a chapter affiliation, one will be assigned based on the location of his or her mailing address. Members may request a chapter transfer by calling (800) 252-4362, ext. 2, or by sending an e-mail to memberservices@hfma.org. Annual regular membership includes a \$30 allocation to hfma magazine and is not deductible from the dues. Annual dues cover membership in National HFMA and in one local chapter. Individual memberships are personal only and do not apply to institutions. Memberships, even those paid by employers, are not transferable.