



1100 SW Gage Blvd.
 Topeka, Kansas 66604-1761
 (785) 267-6003 Phone
 (785) 267-0833 Fax
 khca.org
 khca@khca.org



2020 KHCA/KCAL Sales Associate Membership Application

In submitting my application for associate membership to KHCA/KCAL, I acknowledge that:

1. The associate member's fee is \$450 per calendar year.
2. I have full membership privileges, with the exception of voting.
3. I am welcome to attend all meetings, educational programs, and annual convention.
4. I will pay membership rates and fees where charges prevail.
5. I declare that I am not presently an employee of a nonmember facility.
6. I understand that should I become an administrator, or should I become an employee with a nonmember facility, my associate membership will terminate.
7. I will have access to the KCHA/KCAL members only website.
8. I further declare that I subscribe to the objectives of KCHA/KCAL as stated in Article III of its constitution:
 "It shall be the policy of the association in all of its endeavors to establish and maintain the highest professional and ethical standards as related to the care provided in, and the operations of, licensed health care facilities."

Company

Mailing Address City

State Zip Phone Fax

Trade Show Contact Email

Payment Information:

Total Due: \$450 Check Credit Card Credit Card No. Exp. Date

Name on Card Address

Applicant Name Signature

Company Category (select the most applicable general category summarizing your company's product/services):

<input type="checkbox"/> Consultant	<input type="checkbox"/> Home Health/Hospice	<input type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Vision Services
<input type="checkbox"/> Design/Building/Remodel	<input type="checkbox"/> Housekeeping/Laundry/Linens	<input type="checkbox"/> Physicians Services	<input type="checkbox"/> Wound Care
<input type="checkbox"/> Education/Training	<input type="checkbox"/> Insurance/Risk Management	<input type="checkbox"/> Portable Diagnostic Services	<input type="checkbox"/> Other: If other, please include 1-2 word company category description below: <hr/> <hr/>
<input type="checkbox"/> Employment/Recruitment	<input type="checkbox"/> Legal Services	<input type="checkbox"/> Rehabilitation/Therapy	
<input type="checkbox"/> Environmental Supplies & Services	<input type="checkbox"/> Marketing	<input type="checkbox"/> Safety	
<input type="checkbox"/> Finance	<input type="checkbox"/> Medical Supplies & Equipment	<input type="checkbox"/> Security/Monitoring/Nurse Call	
<input type="checkbox"/> Food & Beverage/Service	<input type="checkbox"/> Behavioral/Mental Health Care	<input type="checkbox"/> Technology/Software	
<input type="checkbox"/> Furniture/Furnishings	<input type="checkbox"/> Nutrition/Wellness	<input type="checkbox"/> Transportation	
<input type="checkbox"/> Group Purchasing	<input type="checkbox"/> Oral Health	<input type="checkbox"/> Uniforms/Footwear	