



HPCAI Professional Membership

The Hospice and Palliative Care Association of Iowa (HPCAI) invites you to join the Association as a Professional Member. This category of membership provides hospice and palliative care professionals including members of the interdisciplinary team and other practitioners an opportunity to engage on an individual basis with HPCAI.

Who is eligible for a professional membership?

- Employees of HPCAI member organizations.
- Individuals that are in support of HPCAI's mission, vision and goals and not employed by a hospice.

In return for your annual membership dues, you will receive the following benefits:

- The bi-weekly *HPCAI Update*, full of important news for hospice and palliative care providers emailed directly to you. During the legislative session, the *HPCAI Update* is rotated with the *Legislative Update* and informs you of the latest legislative and regulatory issues impacting hospice and palliative care.
- Your own copy of the HPCAI Directory, providing contact and demographic information for each HPCAI member agency.
- HPCAI educational program announcements and brochures emailed directly from HPCAI and as soon as the information is available.
- Discounted rates on HPCAI sponsored education.

First Name _____ Last Name _____

E-mail (required) _____ Phone _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Payment Information:

Annual Professional Membership Dues are \$50.00.

HPCAI is a non-profit organization therefore your contribution is tax deductible.

Check

Credit Card

American Express

Discover

MasterCard

VISA

Cardholder Name (please print) _____

Credit Card No. _____ Security Code _____

Expiration Date _____ Cardholder's Phone No. (_____) _____

Cardholder Signature _____

Please mail your completed application and payment to:

Hospice and Palliative Care Association of Iowa
100 East Grand, Suite 120
Des Moines, IA 50309
Questions? Call Penni Upah at (515) 283-9342

For HPCAI Office Use Only:

Date Received _____ Approved By _____

Amount \$ _____ Check # _____