

## **Allied Membership Application**

Application for institutes of education, students, members emeritus, in-planning providers, resident associations, individual consumers and consultants, health plans, media, other non-providers interested in the objectives of LeadingAge California.

Organization Nar	ne:		
City:		State:	Zip:
Phone:		FAX:	Website:
Contact's Name:		Email Addres	55:
		Nonprofit $501(c)(4)$ $\square$ For-profit roust be attached to complete this	
Employees:	Full time:	Part time:	Total:
		Membership Ty	pe
	bership is available to perso		lth care community, a retirement community or npany, complete a Business Partner Application.
Name of School: Expected Gradue  ☐ Member Emer	rovide the following: ation Date: ritus (\$100/yr)		e California Board of Directors for services to the
Companies  ☐ Institution of E  Educational insti ☐ In-Planning Pr	rovider (\$495 year for Le	he activities of the association.  adingAge California plus \$350  onstruction. In-Planning members	
Facility Type: □  Expected comple □ Health Plan (\$  Health plan men □ Media (\$100/y)	I CCRC □ MLRC □ R tion date: 100/yr) nbership is for plans that pro r)	CFE SNF Housing I F	ACBS
		rm?	
			pports candidates seeking public office that support nonprofit housing, ribution please submit a request in writing to info@leadingageca.org

## **How to Submit This Application**

Send this completed application to LeadingAge California at 1315 I Street, Suite 100, Sacramento, CA 85814 or email mripley@leadingageca.org. If you have questions, please contact Melanie Ripley, Director of Membership, at LeadingAge California at (916) 392-5111.

## Thank you for becoming a valued member of the LeadingAge family!

The applicant business and I agree to LeadingAge California's policies and to be bound by LeadingAge California's bylaws and by all applicable rules and regulations, as they may be amended from time to time by LeadingAge California (a copy of these policies are available by written request to LeadingAge California by mail at 1315 I Street, Sacramento, CA 95814.) All sales are final. No refunds on annual membership dues.

Privacy Consent Language for Leading Age California Communications: Whenever I provide e-mail address(es) and fax number(s) to Leading Age California the business and I are consenting to receive Leading Age California communications by email and fax, including, but not limited to, conference/hotel registration notices, legislative updates, exhibitors' communications, educational opportunities and membership reminders, as well as promotions of Leading Age California's various programs and services provided as benefits of membership.

<b>LeadingAge Membership includes your entire organization!</b> Please list any staff, residents/clients, board members you think would like to receive communications from LeadingAge California. (Excludes third party consultants.)			Staff	Resident	Board Member
Name	Title	Email			