

# 2019-20 HFA Membership

HFA has served the hospice, bereavement, and end-of-life care field for more than 30 years. HFA members demonstrate a shared passion for continuous improvement and learning through high-quality, affordable professional education from the nation's top experts. Members also support HFA as a trusted provider of public information about advance care planning, serious illness, death and dying.

## Member Benefits

- ✓ Association with a trusted leader in the hospice and end-of-life care field.
- ✓ Discounts of up to 30% on HFA educational programs and products including webinars, books, DVDs, self-study courses, *Journeys* special issues, and more!
- ✓ Exclusive access to members-only portal containing:
  - Supplementary *Journeys* articles for use in your publications.
  - Monthly educational programs designed for use in your in-service education or educational events.
  - Complimentary content on bereavement, grief, volunteering, and caregiving to use in your brochures and publications.

**Join online at**  
***hospicefoundation.org***

Or send this form to us at:  
1707 L Street NW, Suite 220  
Washington, DC 20036

Fax: 202-457-5815

Email:  
hfamember@hospicefoundation.org

**Please save this document  
before emailing or printing.**

## Contact Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

*The members-only portal is available to this registered e-mail address.*

## Membership Dues *Please check the membership you are renewing:*

<u>Membership Type</u>	<u>Dues</u>	<u>Additional Locations†</u>	<u># of Add'l Locations</u>
Student/Early Career Professional*	<input type="checkbox"/> \$25	n/a	n/a
Individual	<input type="checkbox"/> \$50	n/a	n/a
Volunteer Hospice	<input type="checkbox"/> \$150	n/a	n/a
Hospice - ADC < 150	<input type="checkbox"/> \$250	<input type="checkbox"/> \$25 per location	_____
Hospice - ADC ± 150	<input type="checkbox"/> \$350	<input type="checkbox"/> \$45 per location	_____
Non-Profit Organizations (non-hospice)	<input type="checkbox"/> \$350	<input type="checkbox"/> \$45 per location	_____
For-Profit Organizations (non-hospice)	<input type="checkbox"/> \$625	<input type="checkbox"/> \$65 per location	_____

\*Visit <https://hospicefoundation.org/HFA-Products/Membership> for details. Please provide proof of status with this form.

†Additional location fee applies to separate physical locations/addresses within an organization.

## Payment Information

Total Due (include additional location fees) \$ \_\_\_\_\_  Check Enclosed  Visa  MC  Amex

Cardholder Name: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Cardholder Address: \_\_\_\_\_

\*Address: \_\_\_\_\_ Contact: \_\_\_\_\_ Email: \_\_\_\_\_

\*Address: \_\_\_\_\_ Contact: \_\_\_\_\_ Email: \_\_\_\_\_

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**Have a Question? Call us at 202-457-5811**