



FLORIDA HEALTHCARE ENGINEERING ASSOCIATION SUPPORTING MEMBERSHIP 2012 RENEWAL FORM

Please print or type

INDIVIDUAL'S NAME _____

TITLE _____

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____

E-MAIL ADDRESS _____

PRODUCTS AND/OR SERVICES (For directory listing - ten words or fewer) _____

Use same description as last year. WEBSITE _____

WHAT'S YOUR 'YELLOW PAGES' LISTING CATEGORY?

Categorize your business/trade/service— i.e., if a facility director wished to find you in a "Yellow Pages" for healthcare facilities, where would they look for you? (For example: **Construction/Design; MEP; Fire/Security; Medical Equipment; Supplies; Building Environment** and so on. This may be the same as your description above if you keep it very short and general.)

Use same listing as last year. **LISTING CATEGORY:** _____

(Article IV, Section 3, FHEA Bylaws) Supporting membership in this association shall be available to those individuals who represent firms which provide products and/or services to Florida healthcare facilities, i.e., representatives of manufacturers, vendors, contractors, distributors, registered architects, professional engineers and consultants.

ASHE MEMBERSHIP: Are you, or anyone in your company, a member of ASHE, the national association of which FHEA is an affiliated chapter? Yes, I am currently. I plan to join this year.

Other individual(s) in my company are ASHE members (please include name(s) and contact info): _____

ANNUAL DUES: \$50.00

Membership benefits include:

- Subscription to quarterly FHEA newsletter, "The Whistle."
- Full listing in *FHEA Directory of Supporting Members* (published yearly in November).
- Priority given for booth selection in FHEA Annual Trade Show.
- Supporting members will receive mailings and announcements concerning District meetings and programs. Please indicate the District(s) for which you would like to participate.

District I (Northwest Florida) District III (Central Florida) All Districts

District II (Northeast Florida) District IV (South Florida)

For additional information, please contact the FHEA office (407/332-7767).

PLEASE MAKE CHECK PAYABLE TO AND MAIL TO:

FLORIDA HEALTHCARE ENGINEERING ASSOCIATION
P.O. Box 150755
Altamonte Springs, FL 32715-0755