

**HOME CARE ASSOCIATION OF COLORADO
 ALLIED MEMBER APPLICATION FOR YEAR 2012**
 7400 East Arapahoe Road, #211, Centennial, Colorado 80112
 Phone (303) 694-4728 * Fax (303) 694-4869
 E-mail hcac@assnoffice.com * Web www.hcaonline.org

Membership Category: ALLIED

Home Care Association of Colorado Allied Members are defined as companies that supply services to home care companies but do not provide health-related services and products in the place of residence to persons who have health-related needs. Admission to Allied Member status in HCAC is not an endorsement of an Allied Member's services or products by HCAC. Anyone utilizing the services or products of HCAC's Allied Members should make an independent evaluation of the skills, quality, services and products being offered. Dues are based on the number of employees currently serving Colorado home care companies. Membership dues apply through December 2012.

Company Name: _____

Key Contact Person: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail address: _____ Web site: _____

Our company's primary service is: _____

<u>DUES SCHEDULE</u>	1-9 employees	=	\$ 561.00
	10-25 employees	=	\$ 615.00
	26 + employees	=	\$ 671.00

Dues Amount: \$ _____ **Authorized Signature:** _____

By signing above and/or remitting dues to HCAC, I agree that HCAC has explicit permission to contact representatives of this company in person or by mail, phone, facsimile, e-mail or any other commonly accepted form of communication.

Check enclosed or

Credit Card VISA MC AMEX DISCOVER

Cardholder's name (print) _____

Card Number _____ / _____ / _____ / _____ Exp. Date: _____

Signature _____

Payments to the Home Care Association of Colorado are not deductible as charitable contributions for federal income tax purposes. The 1994 Federal Revenue Reconciliation Act requires that for all payments issued in **2011** you may only deduct **68%** as an ordinary and necessary business expense for federal income tax purposes. Tax ID #84-6085778

Return this form to:
Home Care Association of Colorado
 7400 E. Arapahoe Road #211, Centennial, CO 80112

HCAC OFFICE USE ONLY:

Date Received _____ Dues Amt \$ _____ Paid \$ _____ Ck/Auth# _____ Q _____
 New List _____ Welcome Letter _____ dbase _____ Web listing _____ Completed by _____