



## CHA Associate Membership



California Hospital Association

## Associate Membership Program

The California Hospital Association Associate Membership program is for non-hospital companies that support the vision, mission and activities of CHA and its 400 member hospitals and health systems.

The program is intended to provide law firms, consulting companies, insurance providers and other entities with access to important proprietary information that can further their work on behalf of hospitals.

### Benefits of the Associate Membership Program

Associate Members will be granted access to extensive policy and regulatory updates, data projections, research and financial analysis, legal opinions and analysis, and industry news — important information that is currently only available to member hospitals.

Benefits include:

- Access to CHA's members-only website which includes extensive proprietary information;
- Subscriptions to electronic communications including the daily *CHA News*;
- A listing in the annual *Membership Directory* along with complimentary copies of the directory;
- Acknowledgement on the CHA website as an Associate Member; and
- Discounted, member pricing for CHA education programs and publications, including access to selected members-only education programs.

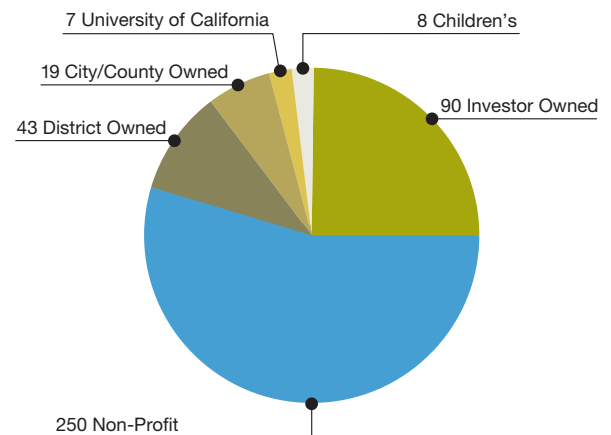
### Annual Membership Dues

Companies with 10 or fewer professionals: \$10,000  
Companies with 11 or more professionals: \$25,000  
Membership benefits are extended to all company employees.

**95% of California hospitals belong to the California Hospital Association. CHA represents more than 400 hospitals and health systems from throughout California — from small, rural hospitals to large, inner-city campuses.**

### Hospitals Represented by CHA

A broad spectrum of hospitals belong to the association.



**Includes 69 Rural Hospitals and 31 Critical Access Hospitals**

For a complete listing of member hospitals and health systems, go to: [www.calhospital.org/about-cha/member-hospitals](http://www.calhospital.org/about-cha/member-hospitals)



**CALIFORNIA  
HOSPITAL  
ASSOCIATION**

*Providing Leadership in  
Health Policy and Advocacy*



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# Associate Membership Application

### Application Process

Please complete the information below and return this form to CHA. Membership applications will be submitted to CHA's Executive Management Committee for consideration. Applicants will be notified within 30 days of the Committee's decision. Once approval is granted, membership fees become due and benefits are granted upon payment. Membership is for a 12-month period and membership is automatically renewed unless either party notifies the other of their intent to discontinue membership.

### Applicant Information

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

\_\_\_\_\_ Primary

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web address: \_\_\_\_\_

Type of Company:

☐ Consulting ☐ Insurance ☐ Law firm

Other, please specify: \_\_\_\_\_

Company Size: ☐ 10 or fewer professionals – \$10,000

☐ 11 or more professionals – \$25,000

Briefly describe services provided: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### References

Applicants are asked to provide one or more reference from a CHA member hospital or health system executive:

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

Title: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

Title: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Submit your completed application

California Hospital Association  
Associate Membership Program  
1215 K Street, Suite 800  
Sacramento, CA 95814

E-mail to: [membership@calhospital.org](mailto:membership@calhospital.org)

### Thank you

Thank you for your interest in joining CHA. If you have questions about the Associate Membership program, please contact Lisa Hartzell at (916) 552-7502 or [lhartzell@calhospital.org](mailto:lhartzell@calhospital.org).



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