

**FLORIDA HEALTH CARE
ACTIVITY COORDINATORS ASSOCIATION**

7923 48th Avenue North
St. Petersburg, FL 33709

2017 MEMBERSHIP APPLICATION



IMPORTANT: Your Name, your Facility Name (if applicable) and your District Number are needed to activate your membership. If this Membership Form is not completed correctly, your membership status may be delayed.

**PLEASE CHECK WHICH TYPE OF MEMBERSHIP APPLIES TO YOU
AND FILL IN THE INFORMATION ASKED FOR BELOW**

Members shall be those individuals that are presently working in the Activity Profession within the Long Term Care field. Each member pays due, votes and is eligible to hold office. FHCACA Membership year runs from January through December and memberships are renewable annually.

Coordinator Name: _____

Title: _____

Phone # (office): _____

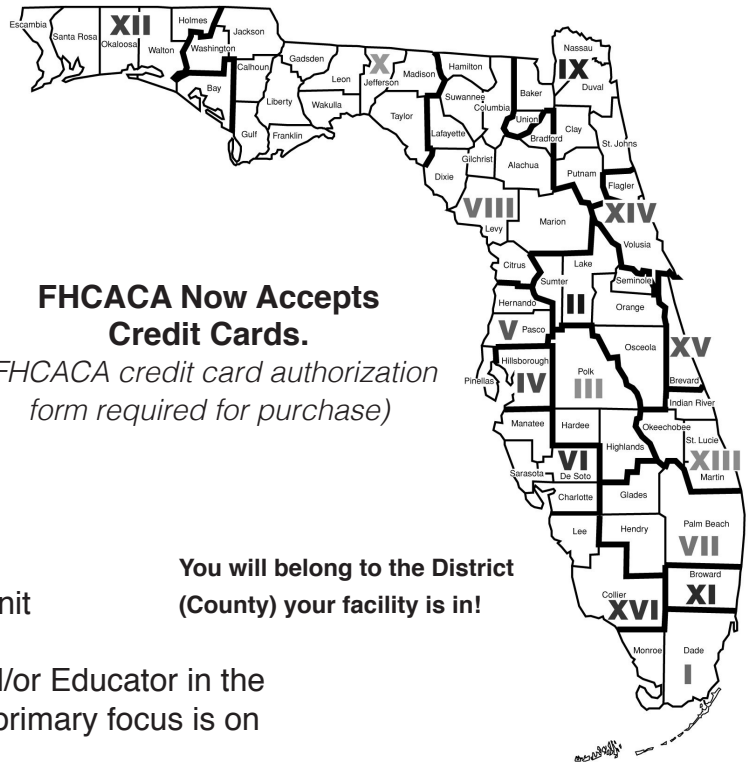
Phone # (Home or Cell): _____

Email Address: _____

(for your newsletter & association notifications)

- Active Member**
- Supportive Member**

Mailing Address – If different from above: _____



**FHCACA Now Accepts
Credit Cards.**

(FHCACA credit card authorization form required for purchase)

**You will belong to the District
(County) your facility is in!**

Check work setting (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Long Term Care | <input type="checkbox"/> Alzheimer's Dementia Unit |
| <input type="checkbox"/> Retirement Home | <input type="checkbox"/> Assisted Living Center |
| <input type="checkbox"/> Sub Acute Unit | <input type="checkbox"/> Activities Consultant and/or Educator in the |
| <input type="checkbox"/> Adult Day Care | field of Activities whose primary focus is on |
| <input type="checkbox"/> Senior Center | Geriatric Population |

MEMBERSHIP DUES

FHCACA State \$ 80.00

FHCACA District \$ 20.00

TOTAL: \$100.00

MAKE CHECKS PAYABLE TO:

FLORIDA HEALTH CARE ACTIVITY COORDINATORS ASSOCIATION
MAIL TO: **Lorri Christopher, FHCACA Treasurer**
7923 48th Avenue North
St. Petersburg, FL 33709
727 420-4362 • fax 727.541.4570
fhcacastatetreasurer@gmail.com

RETURN ONE COMPLETED COPY WITH PAYMENT BEFORE JANUARY 31