

**Nebraska Home Care Association**

**2016 ASSOCIATE MEMBER APPLICATION**

*(Please print and complete all information)*

Company/Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Website: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Please list the types of products and/or services that your company/organization offers to home health, hospice and/or private duty providers:

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

Membership dues to the Nebraska Home Care Association are not tax deductible as charitable contributions for income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses, subject to federal tax restrictions, related to association lobbying activities, which are not tax deductible. For 2016, the portion of your dues which is allocable directly to lobbying, and therefore non-deductible, is 9%. Dues are pro-rated the first year of membership. If you join after January 2016, pro-rated dues are calculated by taking \$300 and dividing it by 12 months. Your dues amount is for the remaining months of membership in 2016.

**ASSOCIATE MEMBER DUES: \$300.00 per year**

Payment Method:  Visa  MasterCard  American Express  Discover  Check (Payable to Nebraska Home Care Association)

A \$3 processing fee is assessed on all credit card transactions.

Name as it appears on credit card \_\_\_\_\_

Account # \_\_\_\_\_ Expiration Date \_\_\_\_ / \_\_\_\_ CID \_\_\_\_\_

Signature \_\_\_\_\_

Billing Address for Credit Card \_\_\_\_\_

*When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.*